Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
Write the name that is on your government-issued picture identification (for example, your driver's license or passport).		Dennis First name R Middle name		Patricia First name J Middle name			
	Bring your picture identification to your meeting with the trustee.	Grieco Last name and Suffix (Sr., Jr., II, III)		Grieco Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years						
	Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9218		xxx-xx-1879			

	otor 1 Dennis R Grieco otor 2 Patricia J Grieco		Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	☐ I have not used any business name or EINs. DBA DRG Training Enterprises, Inc. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5. Where you live		222 Elton Road Stewart Manor, NY 11530-5008	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code Nassau	Number, Street, City, State & ZIP Code		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

	otor 1 Dennis R Grieco otor 2 Patricia J Grieco					Case number (if known)	
						· /	
Par	Tell the Court About	our Bank	ruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				ch, see <i>Notice Required by</i> and check the appropria	y 11 U.S.C. § 342(b) for Individuals Filingate box.	া for Bankruptcy
	choosing to file under	■ Chap	ter 7				
		☐ Chap	ter 11				
		☐ Chap	ter 12				
		☐ Chap	ter 13				
8.	How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local count about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit a pre-printed address.						's check, or money
		□ In	eed to pay	y the fee in installmee in Installmee in Installments (Off	ents. If you choose this opt	tion, sign and attach the Application for I	ndividuals to Pay
		□ I re	equest that t is not req	at my fee be waived uired to, waive your f	(You may request this option	on only if you are filing for Chapter 7. By oour income is less than 150% of the office is in the last of the control of the c	cial poverty line that
						in installments). If you choose this option ficial Form 103B) and file it with your petion	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	■ No.	Go to I	ine 12.			
	residence?	☐ Yes.	Has vo	our landlord obtained	an eviction judgment again	nst vou?	
		ப 165.		No. Go to line 12.	za.a jaaginon agam	,	
						n Judgment Against You (Form 101A) an	d file it as part of

		Dennis R Grieco Patricia J Grieco			Case number (if known)		
Part	t 3: F	Report About Any Bu	sinesses	You Own as a Sole Propr	ietor		
12.	12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business?						
			☐ Yes.	Name and location of b	usiness		
	busing an ind separ as a d	e proprietorship is a ess you operate as dividual, and is not a ate legal entity such corporation, ership, or LLC.		Name of business, if any			
	If you sole p separ	have more than one proprietorship, use a ate sheet and attach		Number, Street, City, S	tate & ZIP Code		
	it to th	nis petition.			box to describe your business:		
					siness (as defined in 11 U.S.C. § 101(27A))		
				_	eal Estate (as defined in 11 U.S.C. § 101(51B))		
					s defined in 11 U.S.C. § 101(53A))		
					ker (as defined in 11 U.S.C. § 101(6))		
				☐ None of the abo	ove		
13.	Chap Bank	ou filing under ter 11 of the ruptcy Code and are small business	deadlines operation	re filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate es. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure .S.C. 1116(1)(B).			
		definition of small	■ No.	I am not filing under Ch	apter 11.		
		ess debtor, see 11 c. § 101(51D).	□ No.	I am filing under Chapt Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
			☐ Yes.	I am filing under Chapte	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	t 4:	Report if You Own or	Have Any	Hazardous Property or A	Any Property That Needs Immediate Attention		
14.		ou own or have any	■ No.				
		erty that poses or is ed to pose a threat	☐ Yes.				
	of im	minent and		What is the hazard?			
		ifiable hazard to c health or safety?					
		you own any erty that needs		If immediate attention is			
		diate attention?		needed, why is it needed?			
	perish livesto or a b	xample, do you own nable goods, or ock that must be fed, nuilding that needs trepairs?		Where is the property?			
					Number, Street, City, State & Zip Code		

Deb	tor 2 Patricia J Grieco			Case number (if known)
art	5: Explain Your Efforts t	eceive a Briefing About Credit Counseling		
5.	Tell the court whether you have received a briefing about credit counseling.	 out Debtor 1: I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a		out Debtor 2 (Spouse Only in a Joint Case): I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of
	•			
		Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after reasonably tried to do so.		☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
		Active duty. I am currently on active military duty in a military combat zone.		Active duty. I am currently on active military duty in a military combat zone.
		If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.		If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 Dennis R Grieco tor 2 Patricia J Grieco				Case number	· (if known)		
Par		ions for R	enorting Purposes			· /		
	What kind of debts do	16a.	Are your debts primarily con			ned in 11 U.S.C. § 101(8) as "incurred by an		
	you have?		individual primarily for a person No. Go to line 16b.	nai, ramily, or nousei	noia purpose.			
			Yes. Go to line 17.					
		16b.		siness dehts? Rusin	ace debte are debte t	hat you incurred to obtain		
		100.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17.					
		16c.	State the type of debts you ow	e that are not consul	mer debts or business	s debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do are paid that funds will be avai			erty is excluded and administrative expenses		
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000)	□ 25,001-50,000		
		□ 50-99)	☐ 5001-10,000		<u></u> 50,001-100,000		
		□ 100-1 □ 200-9		☐ 10,001-25,0	☐ 10,001-25,000 ☐ More than100,000			
19.	How much do you estimate your assets to	□ \$0 - \$		□ \$1,000,001		□ \$500,000,001 - \$1 billion		
	be worth?		01 - \$100,000 001 - \$500,000		□ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$5			
			001 - \$300,000 001 - \$1 million		01 - \$500 million	☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	50.000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	☐ \$10,000,001 - \$50 million		□ \$1,000,000,001 - \$10 billion		
	to be:		001 - \$500,000		□ \$50,000,001 - \$100 million □ \$10,000,000,000 □ \$100,000,001 - \$500 million □ More than \$50			
		■ \$500,001 - \$1 million □ \$100,0)1 - \$500 million	☐ More than \$50 billion		
Par	7: Sign Below							
For	you	I have ex	camined this petition, and I decla	are under penalty of p	perjury that the inform	nation provided is true and correct.		
						under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.		
			rney represents me and I did no nt, I have obtained and read the			an attorney to help me fill out this		
		I request	relief in accordance with the ch	apter of title 11, Unit	ed States Code, spec	ified in this petition.		
			cy case can result in fines up to			property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Deni	nis R Grieco		/s/ Patricia J Grid			
			R Grieco e of Debtor 1		Patricia J Grieco Signature of Debtor			
		Executed	April 25, 2019 MM / DD / YYYY			il 25, 2019 / DD / YYYY		

	Dennis R Grieco Patricia J Grieco	Case number (if known)							
For your att represented	torney, if you are d by one	under Chapt for which the	er 7, 11, 12, or 13 of title 11, e person is eligible. I also ce	United States Code, ertify that I have delive	and have or	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
•	ot represented by , you do not need page.		se in which § 707(b)(4)(D) appeared with the petition is incorre		e no knov	wledge after an inquiry that the information in the			
·	•	/s/ Allan B	. Mendelsohn		Date	April 25, 2019			
		Signature of	Attorney for Debtor			MM / DD / YYYY			
		Allan B. M	endelsohn						
		Printed name							
		Rosen & K	(antrow, PLLC						
		Firm name							
		38 New St							
		Huntingto	n, NY 11743-3327						
		Number, Street,	City, State & ZIP Code						
		Contact phone	631-423-8527	Ema	il address	arosen@rkdlawfirm.com			
		Bar number & St	rato						
		Dai Huilibel & Ol	aic						

Certificate Number: 00301-NYE-CC-032671129



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>April 15, 2019</u>, at <u>1:05</u> o'clock <u>PM EDT</u>, <u>DENNIS R GRIECO</u> received from <u>InCharge Debt Solutions</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>Eastern District of New York</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: April 15, 2019 By: /s/Jimmy Arreaga

Name: Jimmy Arreaga

Title: Certified Bankruptcy Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. 109(h) and 521(b).

Certificate Number: 00301-NYE-CC-032671130



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>April 15, 2019</u>, at <u>1:05</u> o'clock <u>PM EDT</u>, <u>PATRICIA J GRIECO</u> received from <u>InCharge Debt Solutions</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>Eastern District of New York</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: April 15, 2019 By: /s/Jimmy Arreaga

Name: Jimmy Arreaga

Title: Certified Bankruptcy Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. 109(h) and 521(b).

Fill	n this information to identify your	case:			
Deb	or 1 Dennis R Grieco First Name	Middle Name	Last Name		
Deb	or 2 Patricia J Grieco				
	se if, filing) First Name	Middle Name	Last Name		
Unit	ed States Bankruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK		
Cas	e number				
(if kno				_	ck if this is an nded filing
				G	g
∩ ff	icial Form 106Sum				
		and Liabilities ar	nd Certain Statistical Information		40/45
			e are filing together, both are equally responsible t	for cumply	12/15
infor		es first; then complete th	ne information on this form. If you are filing amend		
		new Gammary and ones	it the box at the top of this page.		
Part	Summarize four Assets				
					assets of what you own
1	Schodule A/P. Property (Official E	orm 106 / /B)			,
1.	Schedule A/B: Property (Official Fo 1a. Copy line 55, Total real estate, for	rom Schedule A/B		\$	725,000.00
	1b. Copy line 62, Total personal pro	perty, from Schedule A/B.		\$	23,930.00
	1c. Copy line 63, Total of all property	y on Schedule A/B		\$	748,930.00
Part	2: Summarize Your Liabilities				
				Vour	liabilities
					nt you owe
2.	Schedule D: Creditors Who Have C	laims Secured by Property	(Official Form 106D)		
۷.			the bottom of the last page of Part 1 of Schedule D	\$	523,423.00
3.	Schedule E/F: Creditors Who Have			\$	0.00
	3a. Copy the total claims from Part	1 (priority unsecured claim	ns) from line 6e of Schedule E/F	Ψ	0.00
	3b. Copy the total claims from Part	2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F	\$	273,302.00
			Your total liabilities	\$ \$	796,725.00
Part	3: Summarize Your Income and	Expenses			
4		•			
4.	Schedule I: Your Income (Official Fo Copy your combined monthly incom		÷ I	\$	10,042.00
5.	Schedule J: Your Expenses (Official	Form 106J)			
	,	,		\$	10,871.00
Part	4: Answer These Questions for	Administrative and Stat	istical Records		
6.	Are you filing for bankruptcy under		heck this box and submit this form to the court with yo	our other s	chadulas
	_	on this part of the form. O	THOOK WILLD DON WHILL SUBSTITUTE TO THE COURT WILLI YO	7G1 OU161 St	onodulos.
7.	■ Yes What kind of debt do you have?				
			debts are those "incurred by an individual primarily for one of the statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily the court with your other sched		ve nothing to report on this part of the form. Check th	is box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Debtor 2	Dennis R Grieco Patricia J Grieco	Case number (if known)	
	n the Statement of Your Current Monthly Income: Cop N-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Li		\$ 11,809.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	ıl claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	118,110.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	118,110.00

Fill in this infor	mation to identify you	r case and this	s filing	:				
Debtor 1	Dennis R Grieco							
Deptor i	First Name	Middle N	Name	Last Name				
Debtor 2	Patricia J Grieco)						
(Spouse, if filing)	First Name	Middle N	Name	Last Name				
United States Ba	ankruptcy Court for the:	EASTERN D	DISTRI	CT OF NEW YORK				
Case number _							☐ Check if this is an amended filing	
Schedul	orm 106A/B le A/B: Proj						12/15	
think it fits best. E information. If mor Answer every ques	Be as complete and accur re space is needed, attac stion.	rate as possible. h a separate she	e. If two	only once. If an asset fits in more than one married people are filing together, both are his form. On the top of any additional pages, Estate You Own or Have an Interest In	equally respo	nsible for su	pplying correct	
☐ No. Go to Pai	, , ,	ole interest in an	ny resido	ence, building, land, or similar property?				
1.1			What	is the property? Check all that apply				
222 Elton	Road			Single-family home	Do not dedu	ct secured cla	ims or exemptions. Put	
Street address,	, if available, or other descriptio	n	Duplex or multi-unit building the amount			nt of any secured claims on Schedule D: Who Have Claims Secured by Property.		
Stewart N	Manor NY 11	530-5008		Manufactured or mobile home	Current val		Current value of the	
City	State	ZIP Code		Land Investment property	entire prop	erty ? 5,000.00	portion you own? \$725,000.00	
Cy	Ciais	2 0000		Timeshare				
				Other			our ownership interest ancy by the entireties, or	
			Who I	has an interest in the property? Check one	a life estate	•		
			_	Debtor 1 only	fee owne	ers		
Nassau				Debtor 2 only				
County				Debtor 1 and Debtor 2 only	☐ Check	if this is com	munity property	
				At least one of the debtors and another	`	ructions)		
				information you wish to add about this iten orty identification number:	n, such as loc	cal		
				your entries from Part 1, including any r here		=>	\$725,000.00	
Part 2: Describe	Your Vehicles							

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debto Debto		Dennis R Grieco Patricia J Grieco	Caso	e number (if known)	
3. Ca	rs, vans	s, trucks, tractors, sport utility ve	hicles, motorcycles		
	No				
— ,	Yes				
3.1		Ford Edge 2013 imate mileage: 60000 nformation:	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
			(see instructions)		
3.2		Mercury Mountaineer 2009 imate mileage: 100000 nformation:	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any secure	laims or exemptions. Put ed claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own?
			☐ Check if this is community property	\$3,200.00	\$3,200.00
			(see instructions)		
■ I	Yes				
			n for all of your entries from Part 2, including any that number here		\$15,400.00
Part 3	Desc	ribe Your Personal and Household Ite	ems		
			erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E>	<i>amples</i> No	d goods and furnishings : Major appliances, furniture, linens escribe	china, kitchenware		
_	103. D	miscellaneous a	at residence		\$3,500.00
					. ,
Ex	, No		eo, stereo, and digital equipment; computers, printers edia players, games	, scanners; music collecti	ons; electronic devices
_	. 55. D				.
		miscellaneous a	at residence		\$1,000.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

	ebtor 1 ebtor 2	Dennis R Grieco Case number (if known)	
	☐ Yes.	Describe	
9.		ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments	and kayaks; carpentry tools;
	■ No □ Yes.	Describe	
10.	Firearn Examp	ns oles: Pistols, rifles, shotguns, ammunition, and related equipment	
	☐ Yes.	Describe	
11.	□ No	oles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	Yes.	Describe	
		miscellaneous at residence	\$1,500.00
12.	□ No	y oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, Describe	gold, silver
		miscellaneous at residence	\$1,500.00
	Examp ■ No □ Yes. Any ot ■ No	rm animals bles: Dogs, cats, birds, horses Describe her personal and household items you did not already list, including any health aids you did not list Give specific information	
15		he dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$7,500.00
		scribe Your Financial Assets	
De	o you ov	vn or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No	oles: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petit	tion
		Cash	\$30.00
17.	Examp	its of money oles: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage institutions. If you have multiple accounts with the same institution, list each.	houses, and other similar
	□ No ■ Yes	Institution name:	

Debtor 1 Debtor 2	Dennis R Grieco Patricia J Grieco	Case number (if kno	Case number (if known)		
	17.1.	Chase Checking2278	\$800.00		
	17.2.	Chase Savings9630	\$200.00		
	s, mutual funds, or publicly traded stocks				
☐ Yes.	Institution or issu	uer name:			
joint	oublicly traded stock and interests in incoventure	orporated and unincorporated businesses, including an inte	erest in an LLC, partnership, and		
■ No □ Yes.	. Give specific information about them Name of entity:				
Nego Non-r	tiable instruments include personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them.			
■ No □ Yes.	. Give specific information about them Issuer name:				
Exam ■ No	ement or pension accounts oples: Interests in IRA, ERISA, Keogh, 401(k List each account separately. Type of account:	k), 403(b), thrift savings accounts, or other pension or profit-sha Institution name:	ring plans		
Your		e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications con	npanies, or others		
■ No		Institution name or individual:			
23. Annui	ities (A contract for a periodic payment of m	noney to you, either for life or for a number of years)			
■ No □ Yes.	lssuer name and description	n.			
26 U.S	sts in an education IRA, in an account in .C. §§ 530(b)(1), 529A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition	n program.		
■ No □ Yes.	Institution name and descrip	otion. Separately file the records of any interests.11 U.S.C. § 52	1(c):		
	s, equitable or future interests in property	y (other than anything listed in line 1), and rights or powers	exercisable for your benefit		
■ No □ Yes.	. Give specific information about them				
	ts, copyrights, trademarks, trade secrets aples: Internet domain names, websites, pro-	s, and other intellectual property ceeds from royalties and licensing agreements			
☐ Yes.	. Give specific information about them				
	ses, franchises, and other general intang aples: Building permits, exclusive licenses, c	gibles cooperative association holdings, liquor licenses, professional lic	censes		
☐ Yes.	. Give specific information about them				
Money or	property owed to you?		Current value of the portion you own? Do not deduct secured		

	ebtor 1 Dennis R Grieco ebtor 2 Patricia J Grieco	Case number (if known)	
			claims or exemptions.
28.	. Tax refunds owed to you ■ No □ Yes. Give specific information about them, including whether you alre	eady filed the returns and the tax years	
	 Family support Examples: Past due or lump sum alimony, spousal support, child supp No ☐ Yes. Give specific information 	port, maintenance, divorce settlement, property sett	tlement
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability ber benefits; unpaid loans you made to someone else No	nefits, sick pay, vacation pay, workers' compensat	ion, Social Security
31.	☐ Yes. Give specific information Interests in insurance policies Examples: Health, disability, or life insurance; health savings account	(HSA); credit, homeowner's, or renter's insurance	
	☐ No ☐ Yes. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	Metlife Term	Dennis	\$0.00
	Metlife Term	Patricia	\$0.00
	Northwest Mutual Term	Patricia	\$0.00
32.	 Any interest in property that is due you from someone who has dilif you are the beneficiary of a living trust, expect proceeds from a life in someone has died. No Yes. Give specific information 		property because
	 Claims against third parties, whether or not you have filed a lawsu Examples: Accidents, employment disputes, insurance claims, or right ■ No □ Yes. Describe each claim 		
	Other contingent and unliquidated claims of every nature, includir No ☐ Yes. Describe each claim	ng counterclaims of the debtor and rights to set	t off claims
	 Any financial assets you did not already list ■ No □ Yes. Give specific information 		
36	6. Add the dollar value of all of your entries from Part 4, including a for Part 4. Write that number here		\$1,030.00
Pa	art 5: Describe Any Business-Related Property You Own or Have an Interest	t In. List any real estate in Part 1.	
1	Do you own or have any legal or equitable interest in any business-related p ■ No. Go to Part 6. □ Yes. Go to line 38.	property?	

Debt Debt		Dennis R Grieco Patricia J Grieco		Case number (if known)			
Part (cribe Any Farm- and Commercial Fishing-Related Property You Good own or have an interest in farmland, list it in Part 1.	Own or Have an Intere	est In.			
_		own or have any legal or equitable interest in any farm-	or commercial fishi	ng-related property?			
		Go to Part 7. Go to line 47.					
Part 7	7 :	Describe All Property You Own or Have an Interest in That You	Did Not List Above				
	Exampi No	have other property of any kind you did not already list? les: Season tickets, country club membership Give specific information					
54.	Add th	ne dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00		
Part 8	B:	List the Totals of Each Part of this Form					
55.	Part 1	: Total real estate, line 2			\$725,000.00		
56.	Part 2	: Total vehicles, line 5	\$15,400.00				
57.	Part 3	: Total personal and household items, line 15	\$7,500.00				
58.	Part 4	: Total financial assets, line 36	\$1,030.00				
59.	Part 5	: Total business-related property, line 45	\$0.00				
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00				
61.	Part 7	: Total other property not listed, line 54 +	\$0.00				
62.	Total _I	personal property. Add lines 56 through 61	\$23,930.00	Copy personal property tot	al \$23,930.00		
63.	Total o	of all property on Schedule A/B. Add line 55 + line 62			\$748,930.00		

Fil	l in this inforn	nation to identify your case:					
De	btor 1	Dennis R Grieco First Name	Middle Name		ast Name		
De	btor 2	Patricia J Grieco	Wildele Wallie	-	adi Namo		
(Sp	ouse if, filing)	First Name	Middle Name	L	ast Name		
Un	ited States Ba	nkruptcy Court for the: EA	STERN DISTRICT OF N	EW Y	ORK		
	se number					☐ Check if this is an amended filing	
		rm 106C e C: The Prope	erty You Cla	ıim	as Exempt	4/19	
the nee	property you li	sted on Schedule A/B: Proper dattach to this page as many	rty (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and	
spe any fun exe	ecific dollar ar applicable st ds—may be u emption to a p	nount as exempt. Alternativ atutory limit. Some exempti nlimited in dollar amount. F	ely, you may claim the f ons—such as those for lowever, if you claim an	iull fai r heal r exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement	
Pa	rt 1: Identif	y the Property You Claim as	s Exempt				
1.	Which set of	exemptions are you claiming	ng? Check one only, eve	n if yo	our spouse is filing with you.		
	You are cla	aiming state and federal nonb	ankruptcy exemptions	, 11 IJ S	S.C. 8 522(b)(3)		
	_	aiming state and rederal none		11 0.0	3.0. 3 022(8)(0)		
2				nmnt	fill in the information below.		
۷.	Brief descripti	on of the property and line on	Current value of the		ount of the exemption you claim	Specific laws that allow exemption	
	Schedule A/B	that lists this property	portion you own				
			Copy the value from Schedule A/B	Check only one box for each exemption.			
		Road Stewart Manor, NY Nassau County	\$725,000.00		\$341,650.00	NYCPLR § 5206	
		hedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
		Edge 60000 miles	\$12,200.00		\$4,000.00	NYCPLR § 5205(a)(8)	
	Line from Sci	nedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
	2009 Mercu miles	ıry Mountaineer 100000	\$3,200.00		\$3,200.00	NYCPLR § 5205(a)(8)	
		nedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit		
		ous at residence	\$3,500.00		\$3,500.00	NYCPLR § 5205(a)(5)	
	Line from Sci	nedule A/B: 6.1			100% of fair market value, up to		

Official Form 106C

\$1,000.00

any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$1,000.00

miscellaneous at residence

Line from Schedule A/B: 7.1

NYCPLR § 5205(a)(5)

Debto				Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	niscellaneous at residence ine from Schedule A/B: 11.1	\$1,500.00		\$1,500.00	NYCPLR § 5205(a)(5)
-	and Holli Goricadic Arb. 1111			100% of fair market value, up to any applicable statutory limit	
-	niscellaneous at residence	\$1,500.00		\$1,500.00	NYCPLR § 5205(a)(6)
L	ine from Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
	Chase Checking2278	\$800.00		\$800.00	NYCPLR § 5205(a)(9)
LII	ine nom <i>Schedule A.B.</i> 11.1			100% of fair market value, up to any applicable statutory limit	
	Chase Savings9630	\$200.00		\$200.00	NYCPLR § 5205(a)(9)
L	ine nom <i>Schedule Arb.</i> 11.2			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption Subject to adjustment on 4/01/22 and every No			led on or after the date of adjustmer	it.)
[Yes. Did you acquire the property cover	red by the exemption wi	thin 1	,215 days before you filed this case	?
	□ NO □ Ves				

Fill in this informat	tion to identify you	case:			
Debtor 1	Dennis R Grieco				
-	First Name	Middle Name Last Name			
Debtor 2	Patricia J Grieco				
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankr	ruptcy Court for the:	EASTERN DISTRICT OF NEW YORK			
Case number				☐ Check	if this is an
				amend	ded filing
Official Form	106D				
		Who Have Claims Secure	d by Property	. 1	12/15
Scriedule D	. Creditors	WIIO Have Claims Secure	u by Propert	y	12/15
		two married people are filing together, both are e ut, number the entries, and attach it to this form.			
1. Do any creditors ha	ve claims secured by	your property?			
☐ No. Check th	is box and submit th	is form to the court with your other schedules.	You have nothing else to	o report on this form.	
_	l of the information b	•			
		elow.			
Part 1: List All S	Secured Claims		. Column A	Column B	Column C
		ore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
		al order according to the creditor's name.	Do not deduct the	that supports this	portion
2.4 Ponk Of Am	orion	Describe the property that secures the claim:	value of collateral.	claim	If any \$8,183.00
2.1 Bank Of Am	lerica	Automobile	\$8,183.00	Unknown	φο, 103.00
ordanor o riamo		Automobile			
Attn: Bankrı	uptcy	A control of the state of the s			
Po Box 9822	238	As of the date you file, the claim is: Check all that apply.			
El Paso, TX	79998	Contingent			
Number, Street, Cit	ty, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or so car loan)	ecured		
■ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	,	☐ Judgment lien from a lawsuit			
Check if this clain community debt		Other (including a right to offset)			
	Opened				
	03/16 Last Active				
	Active				

Date debt was incurred 3/15/19

5547

Last 4 digits of account number

Debtor 1 Dennis R Grieco		Case number (if known)		
First Name Middle N Debtor 2 Patricia J Grieco	ame Last Name			
First Name Middle N	ame Last Name			
2.2 Bank Of America Creditor's Name	Describe the property that secures the claim: 2013 Ford Edge 60000 miles	\$8,493.00	\$12,200.00	\$0.00
Attn: Bankruptcy Po Box 982238 El Paso, TX 79998	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.3 Bank Of America	Describe the property that secures the claim:	\$8,190.00	\$3,200.00	\$4,990.00
Creditor's Name	2009 Mercury Mountaineer 100000 miles		V2, 22.22	, ,
Attn: Bankruptcy Po Box 982238 El Paso, TX 79998	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.4 Flagstar Bank	Describe the property that secures the claim:	\$498,557.00	\$725,000.00	\$0.00
Creditor's Name	222 Elton Road Stewart Manor, NY 11530-5008 Nassau County			
Attn: Bankruptcy 5151 Corporate Drive	As of the date you file, the claim is: Check all that apply.			
Troy, MI 48098	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who away the daht? O	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			

Official Form 106D

Debtor 1	Dennis R Grieco)		Case number (if known)	
	First Name	Middle Name	Last Name		
Debtor 2	Patricia J Grieco)			
	First Name	Middle Name	Last Name		
Add the	e dollar value of your e	ntries in Column A on t	his page. Write that number her	e: \$523,423.00	
	s the last page of your nat number here:	form, add the dollar val	ue totals from all pages.	\$523,423.00	
Part 2:	List Others to Be N	otified for a Debt Th	at You Already Listed		
trying to than one	collect from you for a d	lebt you owe to someo debts that you listed in	ne else, list the creditor in Part 1	hat you already listed in Part 1. For example, if a collection agency is I, and then list the collection agency here. Similarly, if you have more ors here. If you do not have additional persons to be notified for any	
B: P:	ame, Number, Street, Cit ank of America .O. Box 15220 'ilmington, DE 198			On which line in Part 1 did you enter the creditor? Last 4 digits of account number	
FI P.	ame, Number, Street, Cit agstar Bank .O. Box 660263 allas, TX 75266	y, State & Zip Code		On which line in Part 1 did you enter the creditor?	

Fill in	this information to identify	your case:				
Debtor	20	eco				
	First Name	Middl	e Name Last Name			
Debtor (Spouse	T dilitara o o		e Name Last Name			
(Spouse	ii, iiiiig) Fiist Name					
United	States Bankruptcy Court for	the: EASTER	N DISTRICT OF NEW YORK			
Case r	number					
(if known						Check if this is an
						amended filing
∩ffi⊲i	ial Form 106E/F					
		o Who Ho	ra Unacquirad Claima			4 O I 4 E
			re Unsecured Claims creditors with PRIORITY claims and			12/15
Schedul left. Atta name ar	le D: Creditors Who Have Claim ach the Continuation Page to th and case number (if known).	s Secured by Pro is page. If you hav	(Official Form 106G). Do not includ perty. If more space is needed, copy re no information to report in a Part	the Part you need, fi	Il it out, number the er	tries in the boxes on the
Part 1:						
	any creditors have priority uns	ecured claims aga	ainst you?			
	No. Go to Part 2.					
	Yes.	ODITY Have a second	or d Ole in a			
Part 2:						
_			nis form to the court with your other sol	hedules.		
_	Yes.					
uns	secured claim, list the creditor sep n one creditor holds a particular of	arately for each cla	alphabetical order of the creditor what im. For each claim listed, identify what creditors in Part 3.If you have more that	t type of claim it is. Do	not list claims already in	cluded in Part 1. If more
						Total claim
4.1	Amex/Macy's		Last 4 digits of account number	6979		\$0.00
	Nonpriority Creditor's Name Correspondence-Bank Po Box 981540	ruptcy	When was the debt incurred?	Opened 03/17 9/19/17	Last Active	_
	El Paso, TX 79998 Number Street City State Zip Co	ode	As of the date you file, the claim	is: Check all that appl	lv	
	Who incurred the debt? Chec	cone.	,		,	
	Debtor 1 only		Contingent			
	Debtor 2 only		Unliquidated			
	Debtor 1 and Debtor 2 only		Disputed			
	☐ At least one of the debtors a					
	☐ Check if this claim is for a					
	debt	_	☐ Obligations arising out of a sep	divorce that you did not		
	Is the claim subject to offset?		report as priority claims			
	No		☐ Debts to pension or profit-shar		nilar debts	
	Yes		Other. Specify Credit Car	'd		_

Debto Debto	r 1 Dennis R Grieco r 2 Patricia J Grieco		Case number (if known)						
4.2	Bank of America	Last 4 digits of account number	2335	\$12,714.00					
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 07/16 Last Active 3/29/19	Ψ12,714.00					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply						
	Who incurred the debt? Check one.	Contingent							
	Debtor 1 only	<u> </u>							
	Debtor 2 only	Unliquidated							
	☐ Debtor 1 and Debtor 2 only	Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	Check if this claim is for a community debt	☐ Obligations arising out of a sepa	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims							
	■ No	☐ Debts to pension or profit-sharin							
	☐ Yes	Other. Specify Credit Card	<u> </u>						
4.3	Bank of America	Last 4 digits of account number	5608	\$0.00					
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50	When was the debt incurred?	Opened 11/07 Last Active 10/05/15						
	Tampa, FL 33634 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated ☐ Disputed							
	Debtor 1 and Debtor 2 only								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims							
	■ No	Debts to pension or profit-sharing							
	☐ Yes	■ Other. Specify Check Cred	dit Or Line Of Credit						
4.4	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	0179	Unknown					
	Attn: Bankruptcy Nc4-105-03-14 Pob 26012 Greensboro, NC 27410	When was the debt incurred?	Opened 12/09 Last Active 10/20/11						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply						
	☐ Debtor 1 only	☐ Contingent							
	■ Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts							
	■ No	·							
	☐ Yes	Other. Specify Credit Card							

Debto Debto	r 1 Dennis R Grieco r 2 Patricia J Grieco		Case number (if known)	
4.5	Capital One	Last 4 digits of account number	3331	\$28,678.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/05 Last Active 3/23/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	■ Debtor 1 only	<u> </u>		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	Capital One	Last 4 digits of account number	4042	\$11,639.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 01/09 Last Active 3/18/19	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.7	Capital One / Costco Nonpriority Creditor's Name	Last 4 digits of account number	8576	\$0.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 12/98 Last Active 2/16/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	

Debtor Debtor	Dennis R Grieco Patricia J Grieco		Case number (if known)	
4.8	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	1696	\$14,243.00
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 09/07 Last Active 3/31/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	=		
	☐ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured	d claim:	
		Student loans		
		☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.9	Chase Card Services	Last 4 digits of account number	3784	\$9,890.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 03/16 Last Active 3/27/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	■ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 		
	debt Is the claim subject to offset?			
	■ No			
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	7636	\$0.00
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 09/82 Last Active 2/11/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	☐ Yes	■ Other. Specify Credit Card	1	

	r 1 Dennis R Grieco r 2 Patricia J Grieco	Case number (if known)		
4.1	Citi/Sears	Last 4 digits of account number	9833	\$0.00
<u>·</u>	Nonpriority Creditor's Name Citibank/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 3/18/02 Last Active 2/23/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Citibank/Exxon Mobile	Last 4 digits of account number	5577	\$0.00
	Nonpriority Creditor's Name Citibank Corp/ Bankruptcy Po Box 790034 Saint Louis, MO 63179	When was the debt incurred?	Opened 10/01/94 Last Active 6/18/13	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Comenity Bank/Talbots Nonpriority Creditor's Name	Last 4 digits of account number	9375	\$0.00
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 8/23/96 Last Active 12/26/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify Charge Acc	count	

	or 1 Dennis R Grieco Patricia J Grieco		Case number (if known)	
4.1 4	Comenity Bank/Talbots	Last 4 digits of account number	1508	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 08/96 Last Active 12/26/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1 5	Comenity Bank/Talbots	Last 4 digits of account number	5569	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 08/96 Last Active 12/26/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Пол		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	☐ At least one of the debtors and another	Student loans	a Ciaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1 6	Costco Citicard Nonpriority Creditor's Name	Last 4 digits of account number	4667	\$16,522.00
	Attn. Bankruptcy Po Box 790040 St. Louis, MO 64195	When was the debt incurred?	Opened 07/16 Last Active 3/28/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin		
	☐ Yes	Other Specify Credit Card		

	or 1 Dennis R Grieco or 2 Patricia J Grieco		Case number (if known)	
4.1 7	Department of Education/Nelnet	Last 4 digits of account number	7219	\$0.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 8/26/13 Last Active 6/16/15	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
	At least one of the debtors and another	<u></u>	a Claim.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loansObligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	_	Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No	<u> </u>		
	Yes	☐ Other. Specify		
4.1				
8	Department of Education/NeInet Nonpriority Creditor's Name	Last 4 digits of account number	9319	\$0.00
	Attn: Claims Po Box 82505	When was the debt incurred?	Opened 8/25/14 Last Active 6/16/15	
	Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	ıl	
4.1 9	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	1919	\$0.00
	Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 06/15 Last Active 11/24/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	■ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	ıl	

	or 1 Dennis R Grieco or 2 Patricia J Grieco		Case number (if known)	
4.2 0	Department of Education/Nelnet	Last 4 digits of account number	5424	\$0.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 8/29/11 Last Active 8/24/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify	g plans, and other similar debts	
		Educationa		
4.2 1	Department of Education/Nelnet	Last 4 digits of account number	8924	\$0.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 8/27/12 Last Active 8/27/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify	 II	
1			•	
4.2	Deptartment Store National Bank/Macy's Nonpriority Creditor's Name	Last 4 digits of account number	4120	\$0.00
	Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040	When was the debt incurred?	Opened 4/25/15 Last Active 3/16/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane and other similar data.	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	■ Other. Specify Charge Acc	count	

Debtor Debtor	Dennis R Grieco Patricia J Grieco	Case number (if known)		
4.2	Deptartment Store National Bank/Macy's	Last 4 digits of account number	1230	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040	When was the debt incurred?	Opened 04/15 Last Active 7/29/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.2	Discover Financial	Last 4 digits of account number	7254	\$19,759.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 02/16 Last Active 3/21/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	■ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	■ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2 5	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	1956	\$8,637.00
	Attn: Bankruptcy Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 01/12 Last Active 3/14/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did flot	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other, Specify Credit Card	I	

Debto Debto	or 1 Dennis R Grieco or 2 Patricia J Grieco		Case number (if known)	
4.2 6	Discover Financial	Last 4 digits of account number	6692	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 12/09 Last Active 2/16/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	
4.2 7	Dsnb Bloomingdales	Last 4 digits of account number	1671	\$0.00
	Nonpriority Creditor's Name Attn: Recovery "Bk" Po Box 9111 Mason, OH 45040	When was the debt incurred?	Opened 09/06 Last Active 12/17/07	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	
4.2 8	Dsnb Bloomingdales	Last 4 digits of account number	0885	\$0.00
	Nonpriority Creditor's Name Attn: Recovery "Bk" Po Box 9111 Mason, OH 45040	When was the debt incurred?	Opened 5/27/16 Last Active 7/17/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	■ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	•	
	No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify Charge Acc	count	

r 1 Dennis R Grieco r 2 Patricia J Grieco		Case number (if known)	
Dsnb Bloomingdales	Last 4 digits of account number	3971	\$0.00
Nonpriority Creditor's Name Attn: Recovery "Bk" Po Box 9111 Mason, OH 45040	When was the debt incurred?	Opened 12/15/03 Last Active 1/24/12	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	a plane, and other similar debts	
■ No	· ·		
Yes	Other. Specify Charge Acc	count	
Gulf Oil	Last 4 digits of account number	0000	\$0.0
Nonpriority Creditor's Name 80 William Street Suite 400 Wellesley Hills, MA 02481	When was the debt incurred?	Opened 02/09 Last Active 7/18/17	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sens	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	iration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Kohls/Capital One	Last 4 digits of account number	5459	\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 12/13 Last Active	
Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharing		
Yes	Other Specify Charge Acc	count	

ebtor 1 Dennis R Grieco ebtor 2 Patricia J Grieco		Case number (if known)	
3 MOHELA	Last 4 digits of account number	0001	\$71,152.00
Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005	When was the debt incurred?	Opened 11/15 Last Active 3/20/19	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	Contingent		
Debtor 1 only	■ Unliquidated		
Debtor 2 only	_ '		
Debtor 1 and Debtor 2 only	■ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	u Claini.	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	al	
Raymour & Flanigan	Last 4 digits of account number	1575	\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 130 Liverpool, NY 13088	When was the debt incurred?	Opened 11/27/10 Last Active 11/20/12	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Santander Bank Nonpriority Creditor's Name	Last 4 digits of account number	2884	\$0.0
Mail Code: MA1-MB3-01-21 2 Morrissey Boulevard Boston, MA 02125	When was the debt incurred?	Opened 12/09/09 Last Active 05/15	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	• • • • • • • • • • • • • • • • • • • •	
☐ Yes	■ Other. Specify Credit Card	i	

Debte Debte	or 1 Dennis R Grieco or 2 Patricia J Grieco		Case number (if known)	
4.3 5	Sofi Lending Corp	Last 4 digits of account number	0693	\$31,249.00
	Nonpriority Creditor's Name Attn: Bankruptcy 375 Healdsburg Ave. Ste 280 Healdsburg, CA 95448	When was the debt incurred?	Opened 12/15 Last Active 3/01/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.3	Sofi Lending Corp	Last 4 digits of account number	1886	\$16,362.00
	Nonpriority Creditor's Name Attn: Bankruptcy 375 Healdsburg Ave Ste 280 Healdsburg, CA 95448	When was the debt incurred?	Opened 12/18 Last Active 3/15/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	■ Contingent		
	Debtor 1 only	_		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Unsecured		
4.3 7	Syncb/hhgreg Nonpriority Creditor's Name	Last 4 digits of account number	9515	\$0.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 10/14 Last Active 3/17/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Пол		
	■ Debtor 2 only	☐ Contingent		
		☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify Charge Acc	count	

Debte Debte	or 1 Dennis R Grieco Patricia J Grieco		Case number (if known)	
4.3 8	Syncb/Lord & Taylor	Last 4 digits of account number	0629	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 09/90 Last Active 2/16/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	■ Contingent		
	☐ Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	
4.3	0l./DL00		2250	* 000 00
9	Syncb/PLCC Nonpriority Creditor's Name	Last 4 digits of account number	2350	\$266.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 07/17 Last Active 3/24/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Acc	count	
4.4	Synchrony Bank/Old Navy	Last 4 digits of account number	3775	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 11/01/11 Last Active 1/20/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Пол		
	■ Debtor 2 only	☐ Contingent		
		☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	1 claim:	
	At least one of the debtors and another	Student loans	a viuiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<u></u>	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
		·		
	Yes	Other. Specify Credit Card	<u> </u>	

Debte Debte	or 1 Dennis R Grieco Patricia J Grieco		Case number (if known)	
4.4 1	Synchrony Bank/PC Richard	Last 4 digits of account number	0696	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 12/10 Last Active 5/25/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	■ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	■ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.4 2	Synchrony Bank/PC Richards & Sons	Last 4 digits of account number	7633	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando El 23206	When was the debt incurred?	Opened 05/17 Last Active 3/27/19	
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Constituent.		
	■ Debtor 2 only	☐ Contingent		
	′	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another	Student loans	a Glaini.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify Charge Acc		
4.4	Synchrony Bank/QVC	Last 4 digits of account number	2765	\$1,595.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 04/16 Last Active 3/19/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	■ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other, Specify Charge Acc	count	

Official Form 106 E/F

	Dennis R Grieco Patricia J Grieco		Case number (if known)	
4.4	TD Bank	Last 4 digits of account number	2277	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 1701 Rt 70 E Cherry Hill, NJ 08034	When was the debt incurred?	Opened 1/10/06 Last Active 2/16/16	
_	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Check Cred	dit Or Line Of Credit	-
	Uas/college Ave Studen	Last 4 digits of account number	5834	\$30,596.00
	Nonpriority Creditor's Name 233 N King St Wilmington, DE 19801	When was the debt incurred?	Opened 09/18 Last Active 2/01/19	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	■ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	al	-
Part 3:	List Others to Be Notified About a De	Ť		
is tryin have m	is page only if you have others to be notified ag to collect from you for a debt you owe to s nore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in at you listed in Parts 1 or 2, list the addi	Parts 1 or 2, then list the collection agency	y here. Similarly, if you
	nd Address ingdales	On which entry in Part 1 or Part 2 did you Line 4.28 of (<i>Check one</i>):		
	x 9001094		Part 1: Creditors with Priority Unsecured Clai	
	rille, KY 40290	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	Claims
Name an	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
_	e Ave. Student Loan	Line 4.45 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ms
PO Bo	x 5863 Stream, IL 60197		Part 2: Creditors with Nonpriority Unsecured	Claims
Caron	Stieani, iL 00137	Last 4 digits of account number		
Name an	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
Exxon			Part 1: Creditors with Priority Unsecured Clai	
	x 78072 ix, AZ 85062		Part 2: Creditors with Nonpriority Unsecured	Claims
	, 00001	Last 4 digits of account number		
Name an	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	

Official Form 106 E/F

Debtor 2 Dennis R Grieco Patricia J Grieco		Case number (if known)
SOFI One Letterman Dr A4700	Line 4.32 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
San Francisco, CA 94129	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
SOFI	Line 4.35 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
One Letterman Dr A4700 San Francisco, CA 94129		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
SOFI	Line 4.36 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
One Letterman Dr A4700 San Francisco, CA 94129		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$T	otal Claim 118,110.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			
	og.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	155,192.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	273,302.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Dennis R Grieco			
	First Name	Middle Name	Last Name	
Debtor 2	Patricia J Grieco			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otato	Zii Oodc	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

Fill in this	information to identify you	r case:			
Debtor 1	Dennis R Grieco)			
D 1 4 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	Patricia J Grieco	Middle Name	Last Name		
	3,				
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK		
Case numb	per				☐ Check if this is an
					amended filing
Official	I Form 106H				
		ا ماملم ا			
Sched	ule H: Your Cod	debtors			12/15
your name	nd number the entries in the and case number (if known you have any codebtors? (i	n). Answer every question	n.	. •	o of any Additional Pages, write
1. 00)	you nave any codeptors? (r you are filing a joint case,	do not list eitner spouse	as a codeptor.	
■ No □ Yes					
Arizona No.	nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. b. Did your spouse, former spo	a, Nevada, New Mexico, P	uerto Rico, Texas, Wash		states and territories include
in line Form	2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
-	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt as that apply:
3.1				☐ Schedule D, line	
	Name			Schedule E/F, I	
				☐ Schedule G, lin	
1	Number Street			_	
(City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, I	
				☐ Schedule G, line	
1	Number Street			_	
(City	State	ZIP Code		

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E-11	to the total and the set of the s								
	in this information to identify your optor 1 Dennis R G								
	otor 2 use, if filling) Patricia J G				_				
	ted States Bankruptcy Court for the	e: EASTERN DISTRICT	OF NEW YORK						
	se number 		-			Check if this is An amendo A supplem 13 income	ed filing ent showin	g postpetition ollowing date:	
0	fficial Form 106I					MM / DD/ `	YYYY	-	
S	chedule I: Your Inc	ome				WIIWI / DD/			12/15
atta	t1: Describe Employment information.					se number (if	known). A		
	If you have more than one job,		■ Employed			☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			■ Not e	employed		
	employers.	Occupation	Self-Employed			House	wife		
	Include part-time, seasonal, or self-employed work.	Employer's name	DRG Training En	terpris	es, Ind	c			
	Occupation may include student or homemaker, if it applies.	Employer's address	222 Elton Road Stewart Manor, N	IY 1153	80-500	8			
		How long employed t	here?						
Par	Give Details About Mo	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for a	ny line	, write \$0 in the	space. Inc	clude your no	n-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	for all er	mploye	rs for that perso	on on the li	nes below. If	you need
					Fo	or Debtor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	5,850.00	\$	0.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	
4	Calculate gross Income Add li	ne 2 + line 3		4	\$	5 850 00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Debt	or 2	Dennis R Grieco Patricia J Grieco	-	(Case n	iumber (<i>if kn</i>	own)				
					For I	Debtor 1			Debtor		
	Сор	y line 4 here	4.		\$	5,850	.00	\$	9	0.00	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	1,767	.00	\$		0.00)
	5b.	Mandatory contributions for retirement plans	5b).	\$.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50	: .	\$.00	\$_		0.00	
	5d.	Required repayments of retirement fund loans	50	ı.	\$	0	.00	\$_		0.00	<u> </u>
	5e.	Insurance	5e	€.	\$	0	.00	\$		0.00)
	5f.	Domestic support obligations	5f.		\$	0	.00	\$_		0.00	<u> </u>
	5g.	Union dues	5g	J.	\$	0	.00	\$_		0.00)
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	0	.00	+ \$ _		0.00	<u>)</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,767	.00	\$		0.00)
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,083	.00	\$_		0.00	<u>)</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	9.0		¢	F 050	.00	¢		0.04	
	Oh	monthly net income.	88		\$	5,959		\$_		0.00	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8b		\$ \$.00	\$ \$		0.00	_
	8d.	Unemployment compensation	80		\$—		.00	\$_		0.00	_
	8e.	Social Security	86		\$.00	\$_		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$.00	\$		0.00	<u> </u>
	8g.	Pension or retirement income	89		\$.00	\$		0.00	
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	0	.00	+ \$_		0.00	<u>)</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$	5,959	.00	\$		0.0	00
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	10	,042.00	+ \$		0.00	= \$	10,042.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,					-,-
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule are contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not acify:	depe							∍ J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	10,042.00
10	D- ·	rou ovnost an ingresse or decrease within the year often year file this form.	2							month	ly income
13.	□ □	vou expect an increase or decrease within the year after you file this form? No. Yes. Explain:	ſ								

Official Form 106I Schedule I: Your Income page 2

ΞIII	in this informa	tion to identify yo	our case.						
						01	l- 'f i	data ta	
Deb	otor 1	Dennis R Gri	ieco			Ch □	eck if t An a	this is: amended filing	
	otor 2 ouse, if filing)	Patricia J Gr	ieco				A su	upplement shov	ving postpetition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF NEW Y	ORK		MM	/ DD / YYYY	
Cas	e number				_				
1	nown)								
O	fficial Fo	rm 106J							
		J: Your I	 Expen	ises					12/1
Be info	as complete a	and accurate as	possible.	If two married people ar ch another sheet to this					
Par		ibe Your House	hold						
1.	Is this a joir ☐ No. Go to								
	_	s Debtor 2 live i	in a senar:	ate household?					
	■ N		а соран						
			st file Officia	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebtor 2		
2.	Do vou have	e dependents?	□ No						
	Do not list Do Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter			17	□ No ■ Yes
					Daughter			19	□ No ■ Yes
									□ No
									☐ Yes ☐ No
									□ Yes
3.	expenses o	penses include f people other the d your depende	han \square	No Yes					
exp	imate your ex		our bankru	y Expenses ıptcy filing date unless y y is filed. If this is a supp					
the		h assistance and		government assistance i luded it on <i>Schedule I:</i> \				Your expe	enses
4.		or home owners		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$		3,930.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
	•	rty, homeowner's				4b.			0.00
		maintenance, re owner's associat		pkeep expenses dominium dues		4c. 4d.	: —		300.00 0.00
5.				our residence, such as ho	me equity loans	та. 5.			0.00

	otor 1 otor 2	Dennis F Patricia		Case num	ber (if known)	
6.	Utilit	ies.				
0.	6a.		heat, natural gas	6a.	\$	615.00
	6b.	-	wer, garbage collection	6b.	\$	100.00
	6c.	-	e, cell phone, Internet, satellite, and cable services	6c.	\$	450.00
	6d.	•	ecify: cable	6d.	· ·	250.00
7.	Food		ekeeping supplies		\$	1,200.00
8.			children's education costs	8.	\$	500.00
9.	Cloth	ning, laund	ry, and dry cleaning	9.	\$	500.00
10.	Pers	onal care p	products and services	10.	\$	150.00
		-	ntal expenses	11.	\$	250.00
12.			Include gas, maintenance, bus or train fare.		_	
			ar payments.	12.	· -	250.00
			clubs, recreation, newspapers, magazines, and books	13.	·	200.00
			ributions and religious donations	14.	\$	100.00
15.	Insur		and the stand for an arrange of the standard o			
		ot include in Life insura	surance deducted from your pay or included in lines 4 or 20.	150	¢	919.00
		Health ins		15a.	·	
		Vehicle in:		15b. 15c.	· -	0.00
				15d.	·	260.00
16			urance. Specify: Disability clude taxes deducted from your pay or included in lines 4 or 20.	130.	Φ	187.00
10.		ify: Estim		16.	\$	250.00
17.			ease payments:			
			ents for Vehicle 1	17a.	· <u> </u>	360.00
			ents for Vehicle 2	17b.	\$	0.00
			ecify: Car Maintenance		\$	100.00
		Other. Spe	·	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not report as	18.	¢	0.00
10			your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	10.	\$	
19.	Spec		s you make to support others who do not live with you.	19.	Ψ	0.00
20		·	erty expenses not included in lines 4 or 5 of this form or on Scheo		our Income	
20.			s on other property	20a.		0.00
		Real estat		20b.	·	0.00
			homeowner's, or renter's insurance	20c.	· ·	0.00
			nce, repair, and upkeep expenses	20d.	\$	0.00
			er's association or condominium dues	20e.	\$	0.00
21.		r: Specify:			+\$	0.00
		. ,				
22.			monthly expenses			
			through 21.		\$	10,871.00
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. /	Add line 22	a and 22b. The result is your monthly expenses.		\$	10,871.00
23.			monthly net income.		_	
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	10,042.00
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	10,871.00
	23c.		our monthly expenses from your monthly income. is your monthly net income.	23c.	\$	-829.00
24.	For exmodifi	kample, do yo ication to the O.	an increase or decrease in your expenses within the year after you be expect to finish paying for your car loan within the year or do you expect your terms of your mortgage? Explain here: College for Daughter			se or decrease because of a
	■ Ye	es.	Explain here: College for Daughter			

Fill in this information to identify your case:	
Debtor 1 Dennis R Grieco	
First Name Middle Name Last Name	
Debtor 2 Patricia J Grieco	
(Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK	
Case number(if known)	☐ Check if this is an amended filing
Official Form 106Dec	
Declaration About an Individual Debtor's Sched	lules 12/15
If two married people are filing together, both are equally responsible for supplying correct inf	ormation.
You must file this form whenever you file bankruptcy schedules or amended schedules. Makin obtaining money or property by fraud in connection with a bankruptcy case can result in fines years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankrup	tcy forms?
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankrup No	tcy forms?
	tcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
■ No	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
■ No □ Yes. Name of person Under penalty of perjury, I declare that I have read the summary and schedules filed with that they are true and correct.	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) his declaration and
■ No □ Yes. Name of person Under penalty of perjury, I declare that I have read the summary and schedules filed with the	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) his declaration and
■ No Yes. Name of person Under penalty of perjury, I declare that I have read the summary and schedules filed with that they are true and correct. X /s/ Dennis R Grieco X /s/ Patricia J Grieco	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) his declaration and

Official Form 106Dec

FIII	in this	information to identify you	r case:					
	otor 1	Dennis R Grieco						
		First Name		e Name	L	ast Name		
	otor 2 use if, filin	Patricia J Grieco		e Name	1:	ast Name		
		5,						
Uni	ted Stat	es Bankruptcy Court for the:	EASTER	N DISTRICT O	F NEW YO)RK		
	se numb	er						Check if this is an amended filing
		Form 107 ent of Financial	Affairs 1	or Indivi	duals	Filing for B	ankruptcy	4/19
info num	rmation ber (if I	elete and accurate as poss . If more space is needed, known). Answer every que	attach a sep stion.	parate sheet to	this forn	n. On the top of an		
Par	t 1:	Give Details About Your Ma	arital Status	and Where Yo	u Lived B	etore		
1.	What is	s your current marital statu	is?					
		arried ot married						
2.	During	the last 3 years, have you	lived anvwh	ere other than	where vo	ou live now?		
	_	, , , , , , , , , , , , ,			, , .			
	■ No		Social Section Inc.	-1 O	(Carabanta			
	⊔ Ye	es. List all of the places you	ived in the las	st 3 years. Do r	not include	where you live nov	V.	
	Debto	r 1 Prior Address:		Dates Debtor 1 ived there	l	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
3. state		the last 8 years, did you exerritories include Arizona, Ca						
	■ N	0						
	□ Ye	es. Make sure you fill out <i>Sci</i>	hedule H: You	ır Codebtors (C	Official For	m 106H).		
Por	4.2	Evaloia the Sources of Vou	r Incomo					
Par	12	Explain the Sources of You	rincome					
4.	Fill in th	u have any income from er ne total amount of income youre filing a joint case and you	u received fro	om all jobs and	all busine	sses, including part	-time activities.	lendar years?
	□ No	os. Fill in the details.						
			Debtor 1				Debtor 2	
			Sources of Check all th			s income e deductions and sions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
the data was filed for bankminton			☐ Wages, obonuses, tip	commissions,		\$21,000.00	☐ Wages, commissions, bonuses, tips	\$0.00
			■ Operatin	g a business			☐ Operating a business	

Official Form 107

Debtor Debtor		ennis R Gr atricia J Gr			Cas	e number (if known)					
				Dahira 4		Daktano					
				Debtor 1		Debtor 2 Sources of income					
				Sources of income Check all that apply.			e /.	Gross income (before deductions and exclusions)			
		☐ Wages, commissions, bonuses, tips			sions,	\$0.00					
				Operating a business		☐ Operating a busi	iness				
For the calendar year before that: (January 1 to December 31, 2017)		☐ Wages, commissions, bonuses, tips	\$167,539.00	☐ Wages, commissionuses, tips	sions,	\$0.00					
				Operating a business		☐ Operating a busi	iness				
wi	nnings. st each No	If you are fili	ng a joint cas	pensions; rental income; interse and you have income that you have from each source separate	ou received together, list it o	only once under Debto	r 1.	gana and			
				Debtor 1		Debtor 2	Debtor 2				
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Э	Gross income (before deductions and exclusions)			
Part 3	Lis	t Certain Pa	yments You	Made Before You Filed for I	Bankruptcy						
6. Ar □		Neither De	ebtor 1 nor E orimarily for a 90 days befo Go to line 7 List below 6	's debts primarily consumer bebtor 2 has primarily consumer personal, family, or household pre you filed for bankruptcy, die consumer to whom you pair editor. Do not include paymen	mer debts. Consumer debt d purpose." d you pay any creditor a tota d a total of \$6,825* or more	I of \$6,825* or more?	nts and th	ue total amount you			
		* Subject	not include	payments to an attorney for the t on 4/01/22 and every 3 years	nis bankruptcy case.						
•	Yes.			or both have primarily consure you filed for bankruptcy, did		l of \$600 or more?					
		■ No.	Go to line 7								
		□ _{Yes}	include pay	each creditor to whom you paid ments for domestic support ob this bankruptcy case.							
С	reditor	's Name and	d Address	Dates of payme	nt Total amount	Amount you W	as this p	ayment for			

	otor 1 btor 2	Patricia J Grieco			Cas	e number (i	if known)		
7.	<i>Inside</i> of wh	in 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	rtners	s; relatives of any gen ol, or owner of 20% o	eral partners; partner r more of their voting	erships of w g securities;	hich you and an	are a genera y managing a	al partner; corporations gent, including one for
		No Yes. List all payments to an insider.							
	Insid	der's Name and Address	Dat	es of payment	Total amount paid	Amount still	you owe	Reason for	this payment
8.	insid	in 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos	-		ments or transfer a	iny propert	y on ac	count of a d	ebt that benefited an
	No No								
		Yes. List all payments to an insider Dates of payment Total amount Amount you		•					
Par	rt 4:	Identify Logal Actions Panassassion	e an	d Foroclosuros	paid	still	owe	Include cred	itor's name
Pal	t 4:	Identify Legal Actions, Repossession	is, an	a Foreciosures					
 Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or cumodifications, and contract disputes. No Yes. Fill in the details. 									
		e title e number	Nat	ure of the case	Court or agency			Status of th	e case
10.	Case numberWithin 1 year before you filed for bankruptcy Check all that apply and fill in the details below.			as any of your prope	erty repossessed, f	oreclosed,	garnish	ned, attached	d, seized, or levied?
		No. Go to line 11.							
		Yes. Fill in the information below.	Des	scribe the Property			Date		Value of the
	Orce	and Name and Address		plain what happened	1		Date		property
11.	acco	in 90 days before you filed for bankrup unts or refuse to make a payment beca No	tcy, o	did any creditor, inc		nancial inst	titution,	set off any a	mounts from your
	_	Yes. Fill in the details.							
	Cred	ditor Name and Address	Des	scribe the action the	creditor took		Date a taken	ction was	Amount
12.		in 1 year before you filed for bankrupto t-appointed receiver, a custodian, or a			erty in the possess	ion of an a	ssignee	for the bene	efit of creditors, a
	_	No Yes							
Par		List Certain Gifts and Contributions							
13.	Withi	in 2 years before you filed for bankrup	tcv. d	lid you give any gift	s with a total value	of more th	an \$600	per person	?
		No	,						
		Yes. Fill in the details for each gift. s with a total value of more than \$600		Describe the gifts			Dates	you gave	Value
		person		2000 INC THE SHIP			the gif		Value
		son to Whom You Gave the Gift and ress:							

Official Form 107

Within 1 year before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No		otor 1 Dennis R Grieco Patricia J Grieco			Case number	(if known)			
Giffs or contributions to charities that total more than \$500 Charity's Name Address (Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No	14.	■ No							
15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred No No Yes. Fill in the details. Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule ArB: Property. 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes, Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Allan B. Mendelsohn, LLP Attorney Fees - See attached 2016(b) \$0.00 30 New St Huntington, NY 11743-3327 arosen@rkdlawfirm.com Attorney Fees - See attached 2016(b) \$0.00 To not include any payment or transfer that you listed on line 16. No Yes, Fill in the details. Person Who Was Paid Address Do not include any payment or transfer that you listed on line 16. No Yes, Fill in the details. Person Who Was Paid Address Description and value of any property Date payment or transfer was made Description and value of any property to anyone, other than property transferred in the ordinary course of your business of financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include offts and transfers that you have already listed on this statement. No Yes, Fill in the details. Person Who Received Transfer		Gifts or contributions to charities that more than \$600 Charity's Name	total				Value		
or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred insurance coverage for the loss include the amount that insurance has paid. List pending insurance coverage for the loss include the amount that insurance has paid. List pending insurance coverage for the loss. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Amount of or transfer any property to anyone who promised to help you deal with your creditors? Description and value of any property Email Emai	Par	t 6: List Certain Losses							
Yes. Fill in the details. Describe the property you lost and how the loss occurred Include the amount that insurance has paid. List pending insurance daims on line 33 of Schedule A/B: Property.	15.		ıptcy or	since you filed for bankruptcy, did	you lose anyt	hing because of thef	ft, fire, other disaster,		
Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers		■ No							
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule ArB: Property. Poil 7:		☐ Yes. Fill in the details.							
List Certain Payments or Transfers			Include	the amount that insurance has paid.	List pending	•			
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Allan B. Mendelsohn, LLP 38 New St Huntington, NY 11743-3327 arosen @rkdlawfirm.com Attorney Fees - See attached 2016(b) \$0.00 Whithin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property or transfer was made Description and value of any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of poech; as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Person Who Received Transfer Description and value of poech; as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Description and value of property transfered payments received or debts paid in exchange	Par	t 7: List Certain Payments or Transfer			,,,,,				
consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Person Who Made the Payment, if Not You Allan B. Mendelsohn, LLP 38 New St Huntington, NY 11743-3327 arosen@rkdlawfirm.com Attorney Fees - See attached 2016(b) No Yes. Fill in the details. Person Who Made the Payment, if Not You Allan B. Mendelsohn, LLP Attorney Fees - See attached 2016(b) No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property Date payment or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of property or payments received or debts paid in exchange									
Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Allan B. Mendelsohn, LLP 38 New St Huntington, NY 11743-3327 arosen@rkdlawfirm.com Attorney Fees - See attached 2016(b) Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property transfer any property to anyone, other than property transfer was made Amount of or transfer was made No Nothin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of payments and property or payments received or debts paid in exchange		consulted about seeking bankruptcy or	preparir	ng a bankruptcy petition?			rty to anyone you		
Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Allan B. Mendelsohn, LLP 38 New St Huntington, NY 11743-3327 arosen@rkdlawfirm.com Attorney Fees - See attached 2016(b) \$0.00 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of property transfersed payments received or debts paid in exchange		□ No							
Address Email or website address Person Who Made the Payment, if Not You Allan B. Mendelsohn, LLP 38 New St Huntington, NY 11743-3327 arosen@rkdlawfirm.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property Address Tansferred Tansfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of payment or transfer any property or payments received or debts paid in exchange		Yes. Fill in the details.							
Allan B. Mendelsohn, LLP 38 New St Huntington, NY 11743-3327 arosen@rkdlawfirm.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property or transfer was made No payment transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Address Description and value of property transferred payments received or debts paid in exchange		Address Email or website address	Yo u		perty	or transfer was			
promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property or transfer was made No Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of payments received or debts paid in exchange		38 New St Huntington, NY 11743-3327		Attorney Fees - See attached	2016(b)		\$0.00		
Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property or payment or transfer was made No Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Address Description and value of payments received or debts paid in exchange	17.					or transfer any prope	rty to anyone who		
Yes. Fill in the details. Person Who Was Paid Address Description and value of any property or transfer was made No Yes. Fill in the details. Person Who Received Transfer Address Description and value of any property or payment or transfer was made Description and value of any property or payment or transfer was made Description and value of payment or transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer property transferred Description and value of payments received or debts paid in exchange					13:				
Address transferred or transfer was made payment 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Address Description and value of property transferred Describe any property or payments received or debts paid in exchange									
transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Address Description and value of property transferred Describe any property or payments received or debts paid in exchange Date transfer was made					perty	or transfer was			
■ No □ Yes. Fill in the details. Person Who Received Transfer Address Description and value of property transferred Describe any property or payments received or debts paid in exchange Date transfer was made		transferred in the ordinary course of you Include both outright transfers and transfers	u r busin s made a	ess or financial affairs? as security (such as the granting of a s					
Person Who Received Transfer Address Description and value of payments received or debts paid in exchange Describe any property or payments received or debts made		■ No	ready list	ed on this statement.					
Address property transferred payments received or debts made paid in exchange				Description and value of	Describe	any property or	Date transfer was		
		Address			payments	received or debts			

Case number (if known)

19.	Witl	hin 10 years before you filed for bankru	ıptcy, di	d you transfer a	ny property to	a self-settl	ed trust or similar device	of v	vhich you are a
	ben =	eficiary? (These are often called asset-page) No							·
	⊔ Na	Yes. Fill in the details. me of trust	1	Description and	value of the p	roperty tran	sferred		ate Transfer was
Pa	rt 8-	List of Certain Financial Accounts, In	nstrume	nts Safe Denos	it Boyes and	Storage Un	its	- 111	aue
20.		hin 1 year before you filed for bankrupt		•	,	•		our	hanafit clased
۷٠.	solo Incl	d, moved, or transferred? ude checking, savings, money market, ses, pension funds, cooperatives, asso No	or other	r financial accou	unts; certificat	es of depos			
		Yes. Fill in the details.							
		me of Financial Institution and dress (Number, Street, City, State and ZIP le)		4 digits of unt number	Type of accinstrument		Date account was closed, sold, moved, or transferred		Last balance before closing o transfe
21.		you now have, or did you have within 1 h, or other valuables?	year be	fore you filed fo	or bankruptcy,	any safe de	eposit box or other depo	sitor	y for securities,
		No							
		Yes. Fill in the details.							
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Describe	e the contents		Do you still have it?
22.	Hav	e you stored property in a storage unit	or place	e other than you	ır home within	1 year befo	ore you filed for bankrupt	cy?	
		No							
		Yes. Fill in the details.							
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	t	Who else has or o it? Address (Number, State and ZIP Code)		Describe	e the contents		Do you still have it?
Pa	rt 9:	Identify Property You Hold or Control		ŕ					
		_						•	and ald by toward
23.		you hold or control any property that someone.	omeone	eise owns? inc	lude any prop	erty you bo	rrowed from, are storing	tor,	or noid in trust
		No Yes. Fill in the details.							
		rner's Name dress (Number, Street, City, State and ZIP Code)	(Where is the pro Number, Street, City, Code)		Describe	e the property		Value
Pa	rt 10:	Give Details About Environmental In	formatio	on					
For	the p	ourpose of Part 10, the following definit	ions ap	ply:					
	toxi	rironmental law means any federal, stat c substances, wastes, or material into ulations controlling the cleanup of thes	the air,	land, soil, surfac	ce water, grou	• .	•		
	Site	e means any location, facility, or proper own, operate, or utilize it, including disp	ty as de	fined under any		al law, whet	her you now own, operat	e, or	utilize it or used
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								

 $Report\ all\ notices,\ releases,\ and\ proceedings\ that\ you\ know\ about,\ regardless\ of\ when\ they\ occurred.$

Debtor 1 Dennis R Grieco
Debtor 2 Patricia J Grieco

	otor 1 Dennis R Grieco otor 2 Patricia J Grieco		Case number (if known)	
24.	Has any governmental unit notified you that No	you may be liable or potentially liable ι	under or in violation of an environm	ental law?
	Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	any release of hazardous material?		
	Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adm ■ No	inistrative proceeding under any enviro	onmental law? Include settlements	and orders.
	☐ Yes. Fill in the details. Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t 11: Give Details About Your Business or 0	Connections to Any Business		
21.	Within 4 years before you filed for bankrupto ☐ A sole proprietor or self-employed ir ☐ A member of a limited liability compound in a partner in a partnership ☐ An officer, director, or managing executed in a partner of at least 5% of the voting in the solution in t	n a trade, profession, or other activity, eany (LLC) or limited liability partnership ecutive of a corporation g or equity securities of a corporation art 12.	either full-time or part-time	y business ?
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification numbe Do not include Social Security Dates business existed	
	DRG Training Enterproses, Inc. 222 Elton Rd. Stewart Manor, NY 11530-5008	Training Joseph Sciacca, CPA 140 Adams Ave. Hauppauge, NY 11788	EIN: 47-5564083 From-To 1994-2019	
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties. No Yes. Fill in the details below.		anyone about your business? Incl	ude all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

Case 8-19-73147-las Doc 1 Filed 04/30/19 Entered 04/30/19 22:36:00

Debtor 1	Dennis R Grieco		
Debtor 2	Patricia J Grieco		Case number (if known)
Part 12:	Sign Below		
are true with a ba		false statement,	nd any attachments, and I declare under penalty of perjury that the answers concealing property, or obtaining money or property by fraud in connection risonment for up to 20 years, or both.
/s/ Den	nis R Grieco	/s/ Pa	tricia J Grieco
Dennis	R Grieco	Patric	ia J Grieco
Signatu	re of Debtor 1	Signat	ure of Debtor 2
Date _	April 25, 2019	Date	April 25, 2019
Did you	attach additional pages to Your Stateme	ent of Financial A	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you ■ No	pay or agree to pay someone who is not	an attorney to h	nelp you fill out bankruptcy forms?
☐ Yes. I	Name of Person Attach the <i>Bankru</i>	ptcy Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your o	ase:			
Debtor 1	Dennis R Grieco				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	Patricia J Grieco First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTR	ICT OF NEW YORK		
Case number					
(if known)					☐ Check if this is an amended filing
	nt of Intentio			Jnder Chapter	· 7 12/15
	lividual filing under chap /e claims secured by you		out this form if:		
you have lead You must file the whiched on the	sed personal property and its form with the court with the court with the court with ever is earlier, unless the form	nd the lease has n thin 30 days after e court extends th	you file your bankruptcy p e time for cause. You mus	et also send copies to the o	for the meeting of creditors, creditors and lessors you list
	nd date the form.	iii a joiiii case, bo	in are equally responsible	nor supplying correct line	imation. Both debtors must
write y	and accurate as possibly our name and case num	ber (if known).	needed, attach a separate	e sheet to this form. On th	e top of any additional pages,
-	tors that you listed in Pa		: Creditors Who Have Clai	ms Secured by Property (Official Form 106D), fill in the
	reditor and the property th	at is collateral	What do you intend to d secures a debt?	do with the property that	Did you claim the property as exempt on Schedule C?
Creditor's	Bank Of America		☐ Surrender the property	y.	□ No
name:	f 2013 Ford Edge 60	200 miles	■ Retain the property an	nd enter into a	Yes
property securing debt	· ·	oo mies	Reaffirmation Agreem Retain the property an		
Creditor's [Bank Of America		☐ Surrender the property ☐ Retain the property ar		□ No
Description of		ntaineer	Retain the property an Reaffirmation Agreem	nd enter into a	Yes
property securing debt	100000 miles		Retain the property an continue making pa		
	Flagstar Bank		☐ Surrender the property		□ No
name: Description of	f 222 Elton Road Ste	wart Manor.	☐ Retain the property an ☐ Retain the property an Reaffirmation Agreem	nd enter into a	■ Yes
property	NY 11530-5008 Na		Retain the property an		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Debtor 2	Dennis R Grieco Patricia J Grieco	Case number (if known)	
securing debt: c		continue making payments	
or any ur n the info	rmation below. Do not list real estate l	y Leases you listed in Schedule G: Executory Contracts and Unexpired I leases. Unexpired leases are leases that are still in effect; the le y lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	Leases (Official Form 106G), fill ease period has not yet ended.
Describe	your unexpired personal property leas	ses W	/ill the lease be assumed?
Lessor's r Descriptio Property:	name: on of leased] No] Yes
Lessor's n Descriptio Property:	name: nn of leased		l No l Yes
Lessor's n	name: on of leased		l No l Yes
Lessor's n Descriptio Property:	name: on of leased		l No
Lessor's n Descriptio Property:	name: on of leased] No
Lessor's n Descriptio Property:	name: on of leased] No
Lessor's n Descriptio Property:	name: on of leased		l No
Part 3:	Sign Below		
	nalty of perjury, I declare that I have inc hat is subject to an unexpired lease.	dicated my intention about any property of my estate that secu	res a debt and any personal
	Dennis R Grieco	X /s/ Patricia J Grieco	
	nis R Grieco ature of Debtor 1	Patricia J Grieco Signature of Debtor 2	

Official Form 108

Date

Date

April 25, 2019

April 25, 2019

Fill in this info	rmation to identify your case:		Check	one box only as d	rected in	this form and in F	Form
Debtor 1	Dennis R Grieco			1Supp:			
Debtor 2 (Spouse, if filing)	Patricia J Grieco		_	1. There is no pres	•		
United States	Bankruptcy Court for the: Eastern Distr	rict of New York	_ •	2. The calculation t applies will be n Calculation (Offi	nade unde	er Chapter 7 Mea	
Case number			_	3. The Means Test	does not	,	
				Check if this is a	n amend	led filing	
Official F	Form 122A - 1					· ·	
Chapter	7 Statement of Your (Current Mon	thly Inco	me			12/15
attach a separa case number (i qualifying milit	and accurate as possible. If two married pe te sheet to this form. Include the line numbe f known). If you believe that you are exempte ary service, complete and file Statement of E calculate Your Current Monthly Income	er to which the additionated from a presumption of Exemption from Presump	I information app f abuse because	lies. On the top of ar you do not have prin	ny addition narily cons	nal pages, write yo sumer debts or be	our name and cause of
	your marital and filing status? Check o						
	narried. Fill out Column A, lines 2-11.	nio only.					
■ Marri	ed and your spouse is filing with you.	Fill out both Columns A	and B, lines 2-1	11.			
☐ Marri	ed and your spouse is NOT filing with	you. You and your sp	ouse are:				
Liv	ring in the same household and are not	t legally separated. Fi	ll out both Colum	nns A and B, lines 2	? - 11.		
ре	ring separately or are legally separated enalty of perjury that you and your spouse ing apart for reasons that do not include e	are legally separated	under nonbankru	ptcy law that applie	es or that		
101(10A). For the 6 months	verage monthly income that you received fro or example, if you are filing on September 15, the s, add the income for all 6 months and divide the on the same rental property, put the income from	ne 6-month period would be total by 6. Fill in the resu	e March 1 through lt. Do not include a	August 31. If the amount many income amount many	unt of your ore than or	r monthly income vance. For example, if	aried during both
				olumn A ebtor 1	Column Debtor non-fili		
•	oss wages, salary, tips, bonuses, overt eductions).	ime, and commission	s (before all \$	5,850.00	\$	0.00	
3. Alimony	r and maintenance payments. Do not inc B is filled in.	clude payments from a	spouse if	0.00	\$	0.00	
of you of from an and roor	unts from any source which are regular or your dependents, including child sup unmarried partner, members of your hous nmates. Include regular contributions from Do not include payments you listed on line	pport. Include regular of sehold, your dependent in a spouse only if Colu	contributions s, parents,	0.00	\$	0.00	
5. Net inco	ome from operating a business, profess	sion, or farm Debto	4				
Gross re	ceipts (before all deductions)	\$ 5,959					
	and necessary operating expenses		.00				
Net mon	thly income from a business, on, or farm	\$ 5,959	Copy .00 here -> \$	5,959.00	\$	0.00	
6. Net inco	ome from rental and other real property		or 1				
Gross ro	ceipts (before all deductions)	Debto \$ 0.00)				
	and necessary operating expenses	-\$ 0.00					
-	thly income from rental or other real prope	erty \$	Copy here -> \$	0.00	\$	0.00	
7. Interest	dividends, and rovalties		\$	0.00	\$	0.00	

Official Form 122A-1

Patricia J Grieco						
			Column A Debtor 1		Column B Debtor 2 o	or
Unemployment compensation			\$	0.00	\$	0.00
Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	unt received was a bene	fit under				
For you		00				
For your spouse	\$0.	00				
Pension or retirement income. Do not include any a benefit under the Social Security Act.			\$	0.00	\$	0.00
Income from all other sources not listed above. S Do not include any benefits received under the Socia received as a victim of a war crime, a crime against h domestic terrorism. If necessary, list other sources or total below.	al Security Act or paymer numanity, or internationa	nts I or				
•			\$	0.00	\$	0.00
			\$	0.00	\$	0.00
Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00
Calculate your total current monthly income. Add each column. Then add the total for Column A to the		\$1	1,809.00	+	0.00	= \$ 11,809.00
2: Determine Whether the Means Test Applies						Total current month income
THE DELETITIES WHELIEF THE WEATS LEST WORKER	s to You					
Calculate your current monthly income for the year	ear. Follow these steps:		0.00	lina 44 l		**
•	ear. Follow these steps:		Сор	y line 11 l	nere=>	\$11,809.00
Calculate your current monthly income for the year	ear. Follow these steps:		Сор	y line 11 l	nere=>	
Calculate your current monthly income for the year 12a. Copy your total current monthly income from line	ear. Follow these steps:		Сор	y line 11 l	nere=> 12	x 12
Calculate your current monthly income for the year 12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of	ear. Follow these steps: e 11 the form		Сор	y line 11 ∣		x 12
Calculate your current monthly income for the year 12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of Calculate the median family income that applies to	ear. Follow these steps: e 11 the form		Сор	y line 11 ∣		x 12
Calculate your current monthly income for the year 12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of Calculate the median family income that applies to Fill in the state in which you live.	the form to you. Follow these steps:		Сор	y line 11 ∣		x 12 b. \$ 141,708.00
Calculate your current monthly income for the year 12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of Calculate the median family income that applies to Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and siz To find a list of applicable median income amounts, go	the form to you. Follow these steps: NY 4 ze of household. go online using the link s	os:			12	x 12 b. \$ 141,708.00
Calculate your current monthly income for the year 12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of Calculate the median family income that applies to Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the base	the form to you. Follow these steps: NY 4 ze of household. go online using the link s	os:			12	x 12 b. \$ 141,708.00
Calculate your current monthly income for the year 12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of Calculate the median family income that applies to Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the base	the form to you. Follow these steps: NY 4 ze of household. go online using the link sunkruptcy clerk's office.	os: pecified	in the separ	ate instruc	12 13 tions	x 12 b. \$ 141,708.00
Calculate your current monthly income for the year 12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of Calculate the median family income that applies to Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and siz To find a list of applicable median income amounts, go for this form. This list may also be available at the ball How do the lines compare? 14a. Line 12b is less than or equal to line 13.	the form to you. Follow these steps: NY 4 ze of household. go online using the link sunkruptcy clerk's office. On the top of page 1, ch	pecified	in the separ	ate instruc	12 tions aption of abu	x 12 b. \$ 141,708.00 \$ 102,384.00
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Calculate your current monthly income for the year 12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of Calculate the median family income that applies to Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and siz To find a list of applicable median income amounts, go for this form. This list may also be available at the bar How do the lines compare? 14a. Line 12b is less than or equal to line 13. Go to Part 3. 14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	the form to you. Follow these steps: NY 4 ze of household. go online using the link sunkruptcy clerk's office. On the top of page 1, check box 2	pecified neck box	in the separ 1, There is esumption o	ate instruc no presun f abuse is	13 tions aption of abu	x 12 b. \$ 141,708.00 \$ 102,384.00 See. by Form 122A-2.
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Calculate your current monthly income for the year 12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the calculate the median family income that applies the fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the base thou do the lines compare? 14a. Line 12b is less than or equal to line 13. Go to Part 3. 14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2. 3: Sign Below By signing here, I declare under penalty of perjunce.	the form to you. Follow these steps: A Ze of household. go online using the link senkruptcy clerk's office. On the top of page 1, check box 2 cury that the information of X	pecified neck box n this sta	in the separ 1, There is esumption o	no presun f abuse is in any atta	13 tions aption of abu	x 12 b. \$ 141,708.00 \$ 102,384.00 See. by Form 122A-2.
Calculate your current monthly income for the year 12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of Calculate the median family income that applies to Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and siz To find a list of applicable median income amounts, go for this form. This list may also be available at the bar How do the lines compare? 14a. Line 12b is less than or equal to line 13. Go to Part 3. 14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2. 3: Sign Below By signing here, I declare under penalty of perjutations R Grieco Dennis R Grieco	the form to you. Follow these steps: NY 4 ze of household. go online using the link sunkruptcy clerk's office. On the top of page 1, check box 2 ury that the information of the step of page 1, check box 2 Date	pecified neck box n this sta /s/ Patri Patricia Signature April 25	in the separ 11, There is esumption of atement and icia J Grie a J Grieco e of Debtor 2	no presun f abuse is in any atta	13 tions aption of abu	x 12 b. \$ 141,708.00 \$ 102,384.00 sse. by Form 122A-2.

Dennis R Grieco

Debtor 1

Fill in this information to identify your case:	Check the appropriate box as directed in
Debtor 1 Dennis R Grieco	lines 40 or 42:
Debtor 2 Patricia J Grieco	According to the calculations required by this Statement:
(Spouse, if filing)	■ 1. There is no presumption of abuse.
United States Bankruptcy Court for the: Eastern District of New York	
Case number(if known)	☐ 2. There is a presumption of abuse.
(II KIIOWII)	☐ Check if this is an amended filing
Official Form 122A - 2	Ç
Chapter 7 Means Test Calculation	04/19
To fill out this form, you will need your completed copy of Chapter 7 Statemen	t of Your Current Monthly Income (Official Form 122A-1).
Be as complete and accurate as possible. If two married people are filing toge space is needed, attach a separate sheet to this form, Include the line number additional pages, write your name and case number (if known). Part 1: Determine Your Adjusted Income	
Copy your total current monthly income. Copy line 11 fro	m Official Form 122A-1 here=> \$ 11,809.00
2. Did you fill out Column B in Part 1 of Form 122A-1? □ No. Fill in \$0 for the total on line 3. ■ Yes. Is your spouse Filing with you? □ No. Go to line 3.	
■ Yes. Fill in \$0 for the total on line 3.	
Adjust your current monthly income by subtracting any part of your spot household expenses of you or your dependents. Follow these steps:	use's income not used to pay for the
On line 11, Column B of Form 122A–1, was any amount of the income you repexpenses of you or your dependents?	ported for your spouse NOT regularly used for the household
■ No. Fill in 0 for the total on line 3.	
☐ Yes. Fill in the information below:	
State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	Fill in the amount you are subtracting from your spouse's income
	\$
	\$
	\$
Total.	\$
	Copy total here=> \$ 0.00
4. Adjust your current monthly income. Subtract line 3 from line 1.	\$11,809.00

Official Form 122A-2

Case 8-19-73147-las Doc 1 Filed 04/30/19 Entered 04/30/19 22:36:00

or 1 or 2	Patricia J Grieco		Case number (if k		
2:	Calculate Your Deductions from Your Income				
ar	Internal Revenue Service (IRS) issues National and I nswer the questions in lines 6-15. To find the IRS staructions for this form. This information may also be	ndards, go online usir	ng the link specifie	d in the separate	mounts
ur	luct the expense amounts set out in lines 6-15 regardless ractual expenses if they are higher than the standards. If me in line 3 and do not deduct any operating expenses t	o not deduct any amou	nts that you subtrac	ted fro your spouse	e's
yoı	our expenses differ from month to month, enter the average	ge expense.			
he	enever this part of the from refers to you, it means both yo	ou and your spouse if C	olumn B of Form 12	2A-1 is filled in.	
	The number of people used in determining your dec	luctions from income			
	Fill in the number of people who could be claimed as explus the number of any additional dependents whom yo the number of people in your household.				
atio	ional Standards You must use the IRS National	al Standards to answer t	he questions in lines	s 6-7.	
	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, an		ine 5 and the IRS N	ational	§1,786
		d other items. per of people you enterenter of people is split in a higher IRS allowance	ed in line 5 and the II to two categoriesp	RS National Standa people who are unde	ards, fill in er 65 and
	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number people who are 65 or olderbecause older people have	d other items. per of people you enterenter of people is split in a higher IRS allowance	ed in line 5 and the II to two categoriesp	RS National Standa people who are unde	ards, fill in er 65 and
eol	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additional contents of the standard of	d other items. per of people you enterenter of people is split in a higher IRS allowance	ed in line 5 and the II to two categoriesp	RS National Standa people who are unde	ards, fill in er 65 and
eol	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additional endowed and the second seco	d other items. per of people you entere inber of people is split in a higher IRS allowance onal amount on line 22.	ed in line 5 and the II to two categoriesp	RS National Standa people who are unde	ards, fill in er 65 and
eo	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additional ple who are under 65 years of age 7a. Out-of-pocket health care allowance per person	d other items. per of people you enterenter of people is split in a higher IRS allowance onal amount on line 22. \$	ed in line 5 and the II to two categoriesp	RS National Standa beople who are unde	ards, fill in er 65 and penses are
eo	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care. The number of the who are 65 or older-because older people have higher than this IRS amount, you may deduct the additional ple who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65	d other items. per of people you enterenter of people is split in a higher IRS allowance onal amount on line 22. \$	ed in line 5 and the li to two categoriesp e for health care cos	RS National Standa people who are undents. If your actual exp	ards, fill in er 65 and penses are
eol	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care. The number of people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additional explexity of the second	d other items. per of people you enterenter of people is split in a higher IRS allowance onal amount on line 22. \$	ed in line 5 and the li to two categoriesp e for health care cos	RS National Standa people who are undents. If your actual exp	ards, fill in er 65 and penses are
÷O	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care. The number of the dollar amount, you may deduct the additional ple who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b.	sper of people you enterenter of people is split in a higher IRS allowance onal amount on line 22.	ed in line 5 and the li to two categoriesp e for health care cos	RS National Standa people who are undents. If your actual exp	ards, fill in er 65 and penses are
÷O	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care. The number of people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additional ple who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b. 1 ple who are 65 years of age or older 7d. Out-of-pocket health care allowance per person	s be some state of people you entered the people is split in a higher IRS allowance on all amount on line 22. S 52.00 X 4 S 208.00 S 114.00	ed in line 5 and the li to two categoriesp e for health care cos	RS National Standa people who are undents. If your actual exp	ards, fill in er 65 and penses are

ebtor 1 ebtor 2		Dennis R Patricia J				Case number	r (if known)				
Loc	al S	Standards	You must use the IRS Local Standards to a	inswer the	questions in lin	nes 8-15.					
			ation from the IRS, the U.S. Trustee Progra oses into two parts:	m has div	rided the IRS L	₋ocal Stand	lard for h	ousing	g for		
_		_	tilities - Insurance and operating expenses	s							
-	Hou	sing and u	tilities - Mortgage or rent expenses								
To a	ans	wer the qu	estions in lines 8-9, use the U.S. Trustee P	rogram cl	hart.						
			o online using the link specified in the separa be available at the bankruptcy clerk's office.		ions for this for	m.					
8.	Ho in	ousing and the dollar a	utilities - Insurance and operating expens mount listed for your county for insurance and	ses: Using d operatino	the number of g expenses	people you	entered in	n line 5	, fill \$		819.00
9.	Н	ousing and	utilities - Mortgage or rent expenses:								
	9a	-	e number of people you entered in line 5, fill in your county for mortgage or rent expenses				\$	3,1	16.00		
	9b	. Total ave	erage monthly payment for all mortgages and	other deb	ts secured by y	our home.					
		contractu	late the total average monthly payment, add a ually due to each secured creditor in the 60 m ruptcy. Then divide by 60.								
		Name of	the creditor	Averaç payme	ge monthly ent						
		Flagsta	r Bank	\$	3,930.00						
			Total average monthly payment	\$	3,930.00	Copy here=>	-\$	3,	930.00	Repeat this amount on line 33a.	
	90	. Net mort	gage or rent expense.								
			line 9b (total average monthly payment) from xpense). If this amount is less than \$0, enter			\$	(0.00	Copy here=>	\$	0.00
10.			hat the U.S. Trustee Program's division of alculation of your monthly expenses, fill in					rrect a	ınd	\$	0.00
	Е	xplain why:									
11.	Lo	cal transp	ortation expenses: Check the number of vel	hicles for v	which you claim	an owners	hip or ope	rating	expense.		
		0. Go to lin	ne 14.								
		1. Go to lin	ne 12.								

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

608.00

2 or more. Go to line 12.

\$

Debtor 1 Debtor 2		is R Grieco cia J Grieco				Case n	umber	(if known)		
13.	You may		pense: Using the IRS Local if you do not make any loan o							
Vel	hicle 1	Describe Vehicle 1:	2013 Ford Edge 60000 i	miles						
13a.	Ownersh	ip or leasing costs usin	g IRS Local Standard			\$	S	497.00		
13b.	•	monthly payment for al clude costs for leased v	I debts secured by Vehicle 1. vehicles.							
	are contr		ly payment here and on line 1 cured creditor in the 60 mont			t				
	Nan	ne of each creditor for	r Vehicle 1	Average payment						
	Bar	nk Of America		\$	360.00					
		Total A	Average Monthly Payment	\$	360.00	Copy	•	-\$	Repeat this amount on line 33b.	
	Subtract		e expense if this amount is less than \$0,	enter \$0.		\$	\$	137.00	Copy net Vehicle 1 expense here => \$	137.00
	hicle 2	Describe Vehicle 2:	2009 Mercury Mountain							
		monthly payment for al	g IRS Local StandardI debts secured by Vehicle 2.					497.00		
	Nan	ne of each creditor for	r Vehicle 2	Average payment	•					
	Bar	nk Of America		\$	319.00					
		Total A	Average Monthly Payment	\$	319.00	Copy here =>		319.	Repeat this amount on line 33c.	
13f.		cle 2 ownership or leas line 13e from line 13d.	e expense if this amount is less than \$0,	enter \$0.			\$	178.00	Copy net Vehicle 2 expense here => \$	178.00
14.			e: If you claimed 0 vehicles in ce regardless of whether you				Standa	ards, fill in the	e Public \$	0.00
15.	also dedu	uct a public transportati	on expense: If you claimed 1 on expense, you may fill in weal Standard for <i>Public Transp</i>	hat you be						178.00

Dennis R Grieco

Debtor 1 Debtor 2 Patricia J Grieco Case number (if known)

Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$	1,767.00
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$_	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$_	919.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or		
	■ for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for any elementary or secondary school education.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$_	42.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	0.00
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$	6,642.00

Debtor 1 Debtor 2 Patricia J Grieco Case number (if known)

Add	itional	Expense Deductions	These are addition	al deduction	ons allowed by th	e Means Test.		
			Note: Do not include	de any exp	ense allowances	listed in lines 6-24.		
25.	insura					ses. The monthly expenses for health y necessary for yourself, your spouse, o	r	
	Health	insurance		\$_	1,357.00			
	Disabi	lity insurance		\$_	187.00			
	Health	savings account		+\$_	0.00			
	Total			\$_	1,544.00	Copy total here=>	\$\$	1,544.00
	Do you	u actually spend this total	amount?			J		
		No. How much do you a	ctually spend?					
		Yes		\$_				
26.	continu	ue to pay for the reasonab	ole and necessary ca our immediate family	are and su who is ur	ipport of an elderl nable to pay for su	actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 19A(b).	\$	0.00
27.						nses that you incur to maintain the es Act or other federal laws that apply.		
	By law	, the court must keep the	nature of these exp	enses con	fidential.		\$	0.00
28.	Additi	onal home energy costs	. Your home energy	costs are	included in your	insurance and operating expenses on		
		believe that you have hom of ill in the excess amount			than the home er	nergy costs included in expenses on line		
		ust give your case trustee nt claimed is reasonable a		our actual	expenses, and y	ou must show that the additional	\$	0.00
29.	\$170.8		for your dependent			e monthly expenses (not more than han 18 years old to attend a private or		
		ust give your case trusteed is reasonable and neces				ou must explain why the amount 23.		
	* Subje	ect to adjustment on 4/01/	22, and every 3 yea	rs after tha	at for cases begu	n on or after the date of adjustment.	\$	0.00
30.	higher		and clothing allowan	ces in the	IRS National Sta	ctual food and clothing expenses are ndards. That amount cannot be more		
		d a chart showing the max tions for this form. This ch				link specified in the separate rk's office.		
	You m	ust show that the addition	al amount claimed i	s reasonal	ble and necessar	y.	\$	0.00
31.		nuing charitable contribution on the number of the number				ntribute in the form of cash or financial	+\$	0.00
32.		II of the additional expenses 25 through 31.	nse deductions.				\$	1,544.00

Case number (if known)

Patricia J Grieco **Deductions for Debt Payment** 33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Mortgages on your home: Average monthly payment 33a. 3,930.00 Copy line 9b here Loans on your first two vehicles: 33b. Copy line 13b here 360.00 33c. Copy line 13e here 319.00 33d. List other secured debts: Name of each creditor for other secured debt Identify property that secures the debt Does payment include taxes or insurance? ☐ No -NONE-Yes No Yes П □ No ☐ Yes Copy total 4.609.00 33e. Total average monthly payment. Add lines 33a through 33d 4.609.00 here=> 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. The state any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Monthly cure Name of the creditor Identify property that secures the debt Total cure amount amount -NONE-\$ $\div 60 =$ \$ Copy total 0.00 0.00 \$ here=> \$ Total 35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. ☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims \$ $0.00 \div 60 =$ \$ 0.00

Dennis R Grieco

Debtor 1

Debtor 2

Debtor 1 Debtor 2		nis R Grieco icia J Grieco		Case i	number (<i>if known</i>	·)		
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § 1 information, go online using the link for <i>Bankruptcy Basi</i> ns for this form. <i>Bankruptcy Basics</i> may also be available	ics specified					
	No	Go to line 37.						
_	_	Fill in the following information.						
_	- 100.	Projected monthly plan payment if you were filing under	Chanter 13	\$				
		Current multiplier for your district as stated on the list is:	·	Ψ				
		Administrative Office of the United States Courts (for dis and North Carolina) or by the Executive Office for United (for all other districts).	stricts in Alal					
		To find a list of district multipliers that includes your district the link specified in the separate instructions for this for be available at the bankruptcy clerk's office.				Cor	oy total	
		Average monthly administrative expense if you were filling	ng under Ch	apter 13	\$		e=> \$ _	
		of the deductions for debt payment. s 33e through 36.					\$_	4,609.00
Total	Deduc	tions from Income						
38. A	dd all o	of the allowed deductions.						
		ne 24, All of the expenses allowed under IRS e allowances	\$	6,642.00				
(Copy lin	ne 32, All of the additional expense deductions	\$	1,544.00				
		ne 37, All of the deductions for debt payment	+\$	4,609.00				
		Total deductions	\$	12,795.00	Copy total	here=	=>	12,795.00
Part 3:	Det	ermine Whether There is a Presumption of Abuse			_			
39. C	alculate	e monthly disposable income for 60 months						
(39a. Co	py line 4, adjusted current monthly income	\$	11,809.00				
	39h Co	py line 38, Total deductions		12,795.00				
`	000. 00	py mile 66, rotal deductione	Ψ	12,733.00	_			
(onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$	-986.00	Copy here=>\$		-986.00) _
ı	For the	next 60 months (5 years)				x 60		
						7		
;	39d. To	tal. Multiply line 39c by 60	39d.	\$	9,160.00	Copy here=>	\$	-59,160.00
40. F i	ind out	whether there is a presumption of abuse. Check the	box that app	lies:		J		
	■ The I	ine 39d is less than \$8,175*. On the top of page 1 of thi	s form, chec	k box 1, <i>Ther</i>	e is no presu	mption of a	buse. Go t	to Part 5.
		ine 39d is more than \$13,650*. On the top of page 1 of 4 if you claim special circumstances. Go to Part 5.	this form, ch	eck box 2, Th	ere is a pres	umption of a	abuse. Yo	u may fill out
г] The I	ine 39d is at least \$8,175*, but not more than \$13,650	*. Go to line	41.				
		to adjustment on 4/01/22, and every 3 years after that for			date of adiu	ıstment		
	- abjoot	to adjustition on 70 1/22, and every o years after that for	Judges med	on or alter the	, adio oi adju	Carrott.		

Dennis R Grieco

ebtor 1 ebtor 2		nis R Grieco icia J Grieco	Case	e number (<i>if known</i>)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. A Summary of Your Assets and Liabilities and Certain Statistical Schedules (Official Form 106Sum), you may refer to line 3b on t	Information	\$ x .25		
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 70	. , . , . , . , . , . ,	\$	Copy here=>	\$
		Multiply line 41a by 0.25				
25	5% of y	ne whether the income you have left over after subtracting all your unsecured, nonpriority debt. e box that applies:	allowed deduc	ctions is enough to pay	y	
		39d is less than line 41b. On the top of page 1 of this form, checo Part 5.	ck box 1, There	is no presumption of abu	use.	
		39d is equal to or more than line 41b. On the top of page 1 of t <i>umption of abuse.</i> You may fill out Part 4 if you claim special circu				
Part 4:	Giv	ve Details About Special Circumstances				
	ite Yo ne	I in the following information. All figures should reflect your average m. You may include expenses you listed in line 25. The must give a detailed explanation of the special circumstances the cessary and reasonable. You must also give your case trustee do justments.	nat make the exp	penses or income adjust	tments	ach
	G	tive a detailed explanation of the special circumstances		erage monthly expense ncome adjustment	е	
			\$			
			\$			
			\$			
	_		\$			
art 5:	Sig	n Below				
	By si	gning here, I declare under penalty of perjury that the information	on this statemer	nt and in any attachmen	ts is true	and correct.
	X /s/	Dennis R Grieco X	/s/ Patricia J	Grieco		
	_	ennis R Grieco	Patricia J Gr	ieco		
	De	ennis R Grieco gnature of Debtor 1	Patricia J Gr Signature of De			

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In re	Dennis R Grieco Patricia J Grieco		Case No.	
	- 4	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEV FOR DE	'RTOR(S)
1 1				` ,
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	2,500.00
	Prior to the filing of this statement I have received		\$	2,500.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspects	s of the bankruptcy c	ase, including:
ł	a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed]	ement of affairs and plan which	may be required;	
6. 1	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding or conto	schargeability actions, judio		es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Α	pril 25, 2019	/s/ Allan B. Mende	elsohn	
\overline{D}	ate	Allan B. Mendelso		
		Signature of Attorne Rosen & Kantrow		
		38 New St		
		Huntington, NY 1 631-423-8527 Fa		
		arosen@rkdlawfii		
		Name of law firm		

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United States Bankruptcy Court Eastern District of New York

In re	Dennis R Grieco Patricia J Grieco		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date:	April 25, 2019	/s/ Dennis R Grieco
		Dennis R Grieco
		Signature of Debtor
Date:	April 25, 2019	/s/ Patricia J Grieco
		Patricia J Grieco
		Signature of Debtor
Date:	April 25, 2019	/s/ Allan B. Mendelsohn
		Signature of Attorney
		Allan B. Mendelsohn
		Rosen & Kantrow, PLLC
		38 New St
		Huntington, NY 11743-3327
		631-423-8527 Fax: 631-423-4536

USBC-44 Rev. 9/17/98

Amex/Macy's Correspondence-Bankruptcy Po Box 981540 El Paso, TX 79998

Bank of America 4909 Savarese Circle Fl1-908-01-50 Tampa, FL 33634

Bank Of America Attn: Bankruptcy Po Box 982238 El Paso, TX 79998

Bank Of America Attn: Bankruptcy Nc4-105-03-14 Pob 26012 Greensboro, NC 27410

Bank of America P.O. Box 15220 Wilmington, DE 19886

Bloomingdales PO Box 9001094 Louisville, KY 40290

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One / Costco Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850 Citi/Sears Citibank/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Citibank/Exxon Mobile Citibank Corp/ Bankruptcy Po Box 790034 Saint Louis, MO 63179

College Ave. Student Loan PO Box 5863 Carol Stream, IL 60197

Comenity Bank/Talbots Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Costco Citicard Attn. Bankruptcy Po Box 790040 St. Louis, MO 64195

Department of Education/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Deptartment Store National Bank/Macy's Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040

Discover Financial Attn: Bankruptcy Po Box 15316 Wilmington, DE 19850

Discover Financial Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850 Dsnb Bloomingdales Attn: Recovery "Bk" Po Box 9111 Mason, OH 45040

Exxon/Mobil PO Box 78072 Phoenix, AZ 85062

Flagstar Bank Attn: Bankruptcy 5151 Corporate Drive Troy, MI 48098

Flagstar Bank P.O. Box 660263 Dallas, TX 75266

Gulf Oil 80 William Street Suite 400 Wellesley Hills, MA 02481

Kohls/Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

MOHELA Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005

Raymour & Flanigan Attn: Bankruptcy Po Box 130 Liverpool, NY 13088

Santander Bank Mail Code: MA1-MB3-01-21 2 Morrissey Boulevard Boston, MA 02125

SOFI One Letterman Dr. - A4700 San Francisco, CA 94129 Sofi Lending Corp Attn: Bankruptcy 375 Healdsburg Ave. Ste 280 Healdsburg, CA 95448

Sofi Lending Corp Attn: Bankruptcy 375 Healdsburg Ave Ste 280 Healdsburg, CA 95448

Syncb/hhgreg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/Lord & Taylor Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/PLCC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Old Navy Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/PC Richard Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/PC Richards & Sons Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/QVC Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896 TD Bank Attn: Bankruptcy 1701 Rt 70 E Cherry Hill, NJ 08034

Uas/college Ave Studen 233 N King St Wilmington, DE 19801 Case 8-19-73147-las Doc 1 Filed 04/30/19 Entered 04/30/19 22:36:00

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

DEBTOR(S):	Patricia J Grieco	CASE NO.:
	Local Bankruptcy Rule 1073-2(b) Cases, to the petitioner's best know	, the debtor (or any other petitioner) hereby makes the following disclosure vledge, information and belief:
was pending at any t spouses or ex-spouse partnership and one have, or within 180	time within eight years before the ses; (iii) are affiliates, as defined in or more of its general partners; (vi	rposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a) are partnerships which share one or more common general partners; or (vii) er of the Related Cases had, an interest in property that was or is included in the
NO RELATED	CASE IS PENDING OR HAS BEI	EN PENDING AT ANY TIME.
☐ THE FOLLOWI	NG RELATED CASE(S) IS PENI	DING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT/D	IVISION:
CASE STILL PEND	DING (Y/N):[If closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANDED DAWN	COLL CAREE ADE DEL ATED (D.	
MANNER IN WHI	CH CASES ARE RELATED (Ref	er to NOTE above):
	LISTED IN DEBTOR'S SCHEDU F RELATED CASE:	JLE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT/D	IVISION:
CASE STILL PEND	DING (Y/N):	If closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHI	CH CASES ARE RELATED (Ref	er to NOTE above):
	LISTED IN DEBTOR'S SCHEDU F RELATED CASE:	JLE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT/D	IVISION:
CASE STILL PEND	DING (Y/N):[If closed] Date of closing:

Dennis R Grieco

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE: (D.	ischarged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to	
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "SCHEDULE "A" OF RELATED CASE:	'A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals v be eligible to be debtors. Such an individual will be require	who have had prior cases dismissed within the preceding 180 days may not ed to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATT	ORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Yor	rk (Y/N): Y
CERTIFICATION (to be signed by pro se debtor/petitioner I certify under penalty of perjury that the within bankruptcy as indicated elsewhere on this form. /s/ Allan B. Mendelsohn	or debtor/petitioner's attorney, as applicable): v case is not related to any case now pending or pending at any time, except
Allan B. Mendelsohn Signature of Debtor's Attorney Rosen & Kantrow, PLLC 38 New St	Signature of Pro Se Debtor/Petitioner
Huntington, NY 11743-3327 631-423-8527 Fax:631-423-4536	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
Failure to fully and truthfully provide all information requir	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009